


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Amended as of 11/1/99

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P92000004945 Corporation Name A.G. AUTO BODY & SALES INC.		

FILED
99 NOV 22 PM 1:49

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



Principal Place of Business 4906 GEORGIA AVE. WEST PALM BEACH FL 33405	Mailing Address 4906 GEORGIA AVE. WEST PALM BEACH FL 33405
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DO NOT WRITE IN THIS SPACE

2 Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3 Date Incorporated or Qualified 11/12/1992		4 FEI Number 65-0366379		Applied For <input type="checkbox"/> Not Applicable	
				5 Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
				6 Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees					
				8 This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No					

Name and Address of Current Registered Agent GARCIA, ANGEL 4906 GEORGIA AVE. WEST PALM BEACH FL 33405				Name and Address of New Registered Agent 81 Name ANA I. RODRIGUEZ 82 Street Address (P.O. Box Number is Not Acceptable) 4906 GEORGIA AVE. 83 84 City West Palm Beach FL 85 Zip Code 33405			
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Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE: **11/1/99**

OFFICERS AND DIRECTORS		ADDITIONS CHANGES TO OFFICERS AND DIRECTORS	
TITLE D NAME GARCIA, ANGEL STREET ADDRESS 2111 N. FLAGLER DR. APT. 25 CITY-ST-ZIP W. PALM BEACH FL 33404	<input checked="" type="checkbox"/> DELETE	1.1 TITLE P 1.2 NAME ANA I. RODRIGUEZ 1.3 STREET ADDRESS 4906 GEORGIA AVE. 1.4 CITY-ST-ZIP West Palm Beach, FL 33405	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 500003060935--3 2.4 CITY-ST-ZIP -12/06/99--01008--023	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: **11/1/99** DAYTIME PHONE: **(561) 547-8167**