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PROFIT CORPORATION ANNUAL REPORT

Jan 23 1998 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998

FILED

DOCUMENT # P93000001086 (6) WEST BOCA AUTO PAINTING, INC. Principal Place of Business Mailing Address 10018 SPANISH ISLES 10018 SPANISH ISLES BAY A-47 BAY A-47 **BOCA RATON FL 33498** BOCA RATON FL 33498 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/30/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0378671 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible X Yes 30 Personal Property Tax due June 30. 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SCHWARTZ, MAYAN 10018 SPANISH ISLE 82 Street Address (P.O. Box Number is Not Acceptable) **BAY A-47** 83 **BOCA RATON FL 33498** 84 Zip Code City 85 FL 11. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE Change TITLE 11 TITLE SCHWARTZ, ISRAEL 12 NAME NAME **32E034** 10018 SPANISH ISLE, BAY A-47 STREET ADDRESS 1,3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition 'n Change TITLE 2.1 TITLE SCHWARTZ, MAYAN 2.2 NAME NAME 10018 SPANISH ISLE, BAY A-47 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** CSTY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Addition Change TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 41 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4,4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE Change TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filling does not examindicated on this annual report or supplemental annual report is true and officer or director of the corporation or the receiver or trustes fy for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an I be execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

WIRED TGNIVA

12/98