SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
1996 SEP 26 AM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000013962 (4)

1. Corporation Name
A 1 A USED CARS, INC.

Principal Place of Business	Mailing Address
11629 SW 51ST COURT COOPER CITY FL 33330 US ?	11629 SW 51ST COURT COOPER CITY FL 33330 US ?

3. Date Incorporated or Qualified: 02/19/1993
3a. Date of Last Report: 08/15/1995
4. FEI Number: 59-2689993 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 600 CYPRESS DR.	26 P.O. BOX 321023
22 Suite, Apt. #, etc. MERRITT ISLAND	27 Suite, Apt. #, etc. COCOA BEACH
23 City & State FLORIDA	28 City & State FLORIDA
24 Zip 32952 25 Country US	29 Zip 32932 30 Country US

9. Name and Address of Current Registered Agent
SCOTT, JOSEPH W
675 FREN DRIVE
MERRITT ISLAND FL 32952

10. Name and Address of New Registered Agent
81 Name: ROBERT L. BENSE
82 Street Address (P.O. Box Number is Not Acceptable): 600 CYPRESS DR.
83 MERRITT ISLAND
84 City — FL 85 Zip Code 32952

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 Robert L. Bense

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☒ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BENSE, ROBERT	1.2 NAME	
STREET ADDRESS	675 FREN DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL	1.4 CITY-ST-ZIP	
TITLE	PRESIDENT ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ROBERT L. BENSE	2.2 NAME	000001961740
STREET ADDRESS	600 CYPRESS DR.	2.3 STREET ADDRESS	-10/01/96--01171--006
CITY-ST-ZIP	MERRITT ISLAND, FL.	2.4 CITY-ST-ZIP	****200.00 ****200.00
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	9/26/96

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Robert L. Bense, PRES. 9/4/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR