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

PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1. Corporation Name
SOUTH FLORIDA A



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000084279 (7)

SOUTH FLORIDA AUTO AUCTION, INC. Principal Place of Business Mailing Address 12700 NW 42 AVENUE 12700 NW 42 AVENUE OPA LOCKA FL 33054 OPA LOCKA FL 33054 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/02/1993 2. Principal Place of Business 2a, Mailing Address 4, FEI Number Applied For 95 w. Jenry 24 95W. 26 65-0477358 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Country Country Ζıp 8. This corporation owes or has paid the current year Intangible 32806 くく Yes 30 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MCKNIGHT, F D 201 E. PINE STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITEE 425 83 ORLANDO FL 32801 City 85 Zip Code 84 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature requir 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition TITLE KELLEY, GAYLE T 1.2 NAME NAME 95 WEST JERSEY ST. STREET ADDRESS 1.3 STREET ADORESS ORLANDO FL 32806 CITY-ST-ZIP 1.4 City-ST-ZIP DELETE Change Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME

14. 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 under the 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, gr (mail attachment with an address.)

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

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1/20/98 407 839 0599

FILED

Mar 30 1998 8:00am

Secretary of State