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May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Morthem Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # PA4000005580 1. Corporation Name JERRY'S R.S. AUTOMOTIVE INC. Specialists			
Principal Place of Business 2223 PEMBROKE RD HOLLYWOOD, FLA. 33020		Mailing Address SAME	
2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country		2a. Mailing Address 25. Suite, Apt. #, etc. 26. City & State 27. Zip 28. Country	
3. Name and Address of Current Registered Agent ANDREW A. HALOWATY 1920 E. HALLANDALE BLVD HALLANDALE, FLA. 33009		10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code	
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 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1			
12. OFFICERS AND DIRECTORS 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY-ST-ZIP 9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY-ST-ZIP 13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY-ST-ZIP 17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607.0502, 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 on this report has the same legal effect as if made under oath before an officer or director of the corporation or the receiver or trustee empowered to procure 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.			
SIGNATURE: Jerry F. Barone SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 4-30-97 Secretary of State: 954-922-43	



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