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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000017160 (0)

1. Corporation Name

INFINITI OF POMPANO, INC.



Principal Place of Business

5230 NORTH FEDERAL HIGHWAY
LIGHTHOUSE POINT FL

Mailing Address

5230 NORTH FEDERAL HIGHWAY
LIGHTHOUSE POINT FL

3. Date Incorporated or Qualified
03/04/1994

3a. Date of Last Report
02/08/1995

2. Principal Place of Business

2a. Mailing Address

21. Street, Apt. #, etc.

26. Street, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. Zip

Country

29. Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THOMPSON, DOUGLAS E
645 SOUTH MILITARY TRAIL
SUITE 6
WEST PALM BEACH FL 33415

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)
645 SOUTH MILITARY TRAIL

83. City

84. City

WEST PALM BEACH

FL

85. Zip Code
33415

11. Pursuant to the provisions of Sections 607.0592 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 607.0592, Florida Statutes.

SIGNATURE

Douglas E. Thompson, Esq.

02/09/96

12. OFFICERS AND DIRECTORS

NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
50 STALUPPI, JOHN	551 S. MILITARY TRAIL	WEST PALM BEACH FL	☒
P PASSARO, MICHAEL	551 S. MILITARY TRAIL	WEST PALM BEACH FL	☒
			☐
			☐
			☐
			☐
			☐
			☐
			☐
			☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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
DPS	STALUPPI, JEANETTE	551 S. MILITARY TRAIL	WEST PALM BEACH, FL, 33415												

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or on an attachment with an address.

SIGNATURE: Jeanette Staluppi
Director/President/Secretary 02/09/96 (407) 683-7100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date of Filing

CR2E034 (12/95)