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

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**PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION FILED Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS 98 APR - 1 AM 11: 05 DOCUMENT # P94000029003 (8) SECRETARY OF STATE TALLAHASSEE, FLORIDA J&M AUTO SALES, INC alachee fkw4 3190-2 APPALACHEE PKWY. 1406 AVONDALE WAY TALLAHASSEE FL 32311 TALLAHASSEE FL 32311 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/15/1994 PKWY 28. Mailing Address CC 26 3109 HOYAQCheePKWY 2. Principal Place of Busines 4. FEI Number Applied For 59-3324006 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be allahussee, FI 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name. ELLIS, MICHAEL R 1406 AVONDALE WAY 82 TALLAHASSEE FL 32311 83 a llahassee 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 stered Agent signature CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change DELETE TITLE 1.1 TITLE DIRECTOR-ELLIS, MICHAEL R NAME 1.2 NAME 11CHAR RETLIS 1406 AVONDALE WAY 1406 AVO-DONE WAY STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL 32211 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE NAME 2.2 NAME hus PKW7 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 City-St-ZIP DELETE TITLE 3.1 TITLE -04/02/98--01080--001 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS \*\*\*\*150.00 \*\*\*\*150.00 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 DELETE TITLE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE TITLE 6.1 TITLE Change NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in