

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 12 PM 10:02

DOCUMENT # P94000038582 (0)

1. Corporation Name

LOCAL AUTO EXCHANGE, INC.

Principal Place of Business

3930-A VILLAGE DR.
DELRAY BEACH FL 33445

Mailing Address

3930A VILLAGE DR.
DELRAY BEACH FL 33445

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/23/1984

3a. Date of Last Report

2. Principal Place of Business

21 2404 N. Dixie Hwy

2a. Mailing Address

26 Suite, Apt. #, etc.

4. FEI Number

65-0495075

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 City & State

Wilton Manors, FL

28 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 Zip

33305

25 Country

Broward

29 Zip

30 Country

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

GOROWITZ, JERRY
3930-A VILLAGE DR.
DELRAY BEACH FL 33445

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME GOROWITZ, JERRY
STREET ADDRESS 3930-A VILLAGE DR.
CITY- ST- ZIP DELRAY BEACH FL 33445

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DPT Change Addition
1.2 NAME Gorowitz, Jerry
1.3 STREET ADDRESS 3930A Village Dr
1.4 CITY- ST- ZIP Delray Bch, FL 33445

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

2.1 TITLE
2.2 NAME Gorowitz, Stacy L Change Addition
2.3 STREET ADDRESS 3930A Village Dr
2.4 CITY- ST- ZIP Delray Bch, FL 33445
VP, S, D

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

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 110.07(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 (if and only if on an attachment with an address).

SIGNATURE:

Stacy Gorowitz, V-P

3-20-95

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