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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400038582 (0)

LOCAL AUTO EXCHANGE, INC.

FILED Apr 27 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						11 99199 11197 19191 9114	1 10-10 1101 1001
2501 N DIXIE HWY 3930-A VILLAGE DR.							
POMPANO BCH FL 33064 DELRAY BEACH FL			5		DO NOT WRITE IN THIS SPACE		
U\$					3. Date Incorporated or Qualified		
					05/23/1994		
2. Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number		Applied For
21 3930-A VILLAGE Dr 28					65-0495075		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.7	5 Additional
27					5. Certificate of Status Desired	Fee	Required
City & State City & State					6. Election Campaign Financing	\$5.0	00 May Be
23 DC/10	av Beach	28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Country		8. This corporation owes or has pa	id the current year	Intangible
24 33H	45 🖾 USA	29 30	0		Personal Property Tax due June		□ No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent	
GO	ROWITZ, JERRY		81	Name			
3930-A VILLAGE DR.			82	Stroot Add	ress (P.O. Box Number is Not Acceptate	ile)	
	RAY BEACH FL 33445		"	Street Address (1.0. Box Hamber is Not Addoption)			
521611 551011 12 00 110			83				
			-	Oit :		les l	Zip Code
			84	City		FL 85 Z	ip Code
11. Pursuani t	o the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	, the above	e-named corp	poration submits this statement for the p	ourpose of changin	ig its registered
11. Pursuant to the provisions of Soctions 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, typod or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstalling) DATE							
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECT	FORS IN 12
TITLE	DPT	DELETE	1.1 TITLE			☐ Chan	ge 🔲 Addition
NAME	GOROWITZ, JERRY	1.2 NA					;
STREET ADDRESS	3930-A VILLAGE DR.			ADDRESS			li
CITY-ST-ZIP			1.4 C/TY - S	ST-ZIP			
TITLE			2.1 TITLE			☐ Chan	ge 🔲 Addition !
NAME	GOROWITZ, STACY L		2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP	DELRAY BCH FL		2 4 CITY-ST-ZIP				
TITLE	DELETE		3.1 TITLE			☐ Chan	ge Addition
NAME			3.2 NAME	1			
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3 4. CITY-				l
TITLE		DELETE	41 TITLE	-		Chan	ge Addition
NAME		-	4 2 NAME				
STREET ADDRESS			1	ADDRESS			
1 1			4.4 CITY-5				
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	11-211		Chan	oe Addition
			5.2 NAME				` _
NAME CARCET ADDRESS				T ADDRESS			
STREET ADDRESS							
CITY - S1 - ZIP		DELETE	5.4 CITY-1 6.1 TITLE	51-211		☐ Chan	nge Addition
TITLE		betelt	E				
NAME			6.2 NAME				
STREET ADDRESS			1	ADDRESS			i
CITY-ST-ZIP		ith this bling does not availed	6.4 CITY-1	ST-ZIP	Section 119.07(3)(i), Florida Statutes.	further certify that	the information
14. Thereby o	ertity that the information supplied w	an this filing does not qualify for	nie exemit	WOU STREET II	r aection in e.o.(a)(i), rionua atatotes. I	termor continy mat	uno mitorifiation)

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 at 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 changed, or on an attachment with an address.

CIGNATURE.

- Man B- cerry Growitz

954-936-4411