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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000052189 (5)

NATIONAL AUTO SALES, INC.

FILED Feb 26 1997 8:00am Secretary of State



Principal Place of Business 321 N. CONGRESS AVE. DELRAY BEACH FL 33445		Mailing Ac	Mailing Address				E 1991/1991 NID 1911/1 919/1 98/H 98/H 98/H 98/H 1911/1 1918/ 11/40 NIGOT NEGET LENA 1911/ 1991			
		321 N. CONGRESS AVE. DELRAY BEACH FL 33445-3434								
							3. Date incorporated or Qualified 07/11/1994		e of Last	•
2. Principal P	lace of Business	2a. Mailing	Address				4, FEI Number			Applied For
21		26					65-0503297		h	Not Applicable
Suite, Apl	#, etc.	Suite, 2	Apt. #, etc				5. Certificate of Status Desired			5 Additional Required
City & State	0	Crty &	State			······	6. Election Campaign Financing		\$5.0	0 May Be
23		28					Trust Fund Contribution			d to Fees
Zip	Country	Zip		Co	untry		8. This corporation has liability for	intangible		
24	25	29		30] Yes [
	g. Name and Address of Curre	ent Registered A	gent		I		10. Name and Address of New Re	gistered A	gent	
GAS	SS, DANIEL G				81	Name				
	01 NW 50TH ST., #204				82	Stroot Add	ress (P.O. Box Number is Not Acceptat	do)	·····	
	NRISE FL 33351					Silect Addi	355 (F.O. Box Number is Not Acceptable)			
301	INIOE I E 3003 I				83					
					84	City		C 1	85 Zi	p Code
					<u> </u>			FL	<u> </u>	
11, Pursuant office or r	to the provisions of Sections 607.0t registered agent, or both, in the Stat	ioz and 607.1508 le of Florida. Sucl	s, Florida Statu h change was	ites, the a authorizi	apove sd by	3-nameo corp / the corporat	poration submits this statement for the pation's board of directors. I hereby accept	ourpose or of the appo	cnanging intment	g its registered as repistered
agent. La	im familiar with, and accept the obli	gations of, Sectio	n 607.0505, F	lorida Sta	atutes	3.				
SIGNATURE										
	Stignation Typed to provided natural registered in		olo (NO			nt signature requir	red when reinstaling)	DATE		
12.	OFFICERS A	ND DIRECTORS	DELETE	13.	71TLE		ADDITIONS/CHANGES TO OFFIC		Chang	
THILE	P								L Criaing	c
NAMÉ	STERN, JUDITH C				NAME					
STREET ADDRESS	4 INLET CAY DRIVE					ADDRESS				
CITY-ST-ZIP	OCENA RIDGE FL 33435		DELETE		CITY-S	I - ZIP			Chang	e Addition
TITLE			☐ DECE IE	1	TITLE	1			L Unlang	e Magition
NAME					NAME	ľ				
STREET ADDRESS				2.3	STREET	ADDRESS				
CITY - ST - ZIP			1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			ST-ZIP				
TITLE !			DELETE		TITLE	1			Chang	e L_ Addition
NAME					NAME					
STREET ADDRESS				3.3	STREET	ADDRESS				
CITY+ST-7/P				*****	CITY - S	ST-ZIP				—————————————————————————————————————
THLE			DELETE	4.11	TITLE	}			Chang	e Additio
NAME				4.2	NAME	İ				
STREET ADDRESS				4.3	STREET	ADDRESS				
CITY - S1 - ZIP				4.4	CITY-S	T-ZIP			p-1141	
TITLE			DELETE	5.1	TITLE				Chang	e Additio
NAME				5.2	NAME					
STREET ADDRESS				53	STREET	ADDRESS				
CITY - ST - ZIP				54	CITY-S	IT-ZIP				
TITLE			DELETE	61	TITLE				Chang	e Additio
NAME				62	NAME	1				
STREET ADDRESS				63	STREET	ADDRESS				
CHTY-ST-ZIF					CITY-S					

14. I do 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Buy Latter BATERY ESTERN UP 2/10/97 51-26J-16J-16W.