FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS P94000088601 DOCUMENT # Corporation Name ISAACS AUTO SALES, INC. Principal Place of Business Mading Address FICE THIN STREET WEST 4700-4-4TH-CTDEET-AVECT-**GRADENTON FL 34205 BRADENTON FL 34205** 3a. Date of Last Report 3. Date Incorporated or Qualified 12/05/1994 04/27/1995 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE 26 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State \$5.00 May Be City & State 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Country $Z_{\rm IP}$ 8. This corporation has liability tang ble tax under s. 199.032 Florida Statutes Yes No 30 29 rent Registered Agent 10. Name and Address of New Registered Agent 81 Name ISAACS, VERNON Street Address (P.O. Box Number is Not Acceptable) 82 1700-14TH OTREET WEST BRADENTON FL 246 83 84 City 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 Fiorida Such change was authorized by the corporation's board of directors. I mereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 4-29-96 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12/ TITLE DELETE 1 1 Inte ☐ Change Addit-on ISAACS, VERNON NAME E034 1.2 NAME 4702-14TH STREET WEST 5004 U.S. 301 E. STREET ADDRESS. 1.3 STREET ADDRESS BRADENTON FL @4205 .94203 CITY - ST- ZIP 14 C TY - S1 - 7 P TILLE VSD Change Addition 2.1 II 1 F ISAACS, MARLENE NAME 2.2 NAM5 3703 39 T.E. MACH: MAG-8105 STAFET ADDRESS 2.3 STREET ADDRESS **BRADENTON FL 34209** CITY-ST-ZIP 2.4 City - St. ZiP DELETE TITLE 3.1 HHE Change Addition ISAACS, DEBBIE 39 ST. E. NAME 3.2 NAME 703 7810-SAN-JUAN STREET ADDRESS 3.3 STREET ADDRESS **BRADENTON FL 24209** 3.4 C(Tr - \$1 - Z(P CITY - ST - ZIP DE LETE 4 1 TTLE TITLE Change | ncitibbA 4.2 NAME NAME STREET ADDRESS 4.3 STREET ARCRESS CITY - ST - ZiP 4.4 CiTY - ST. Zif: • DELETE 5 11011 TITLE Change Addition F 2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C(F) ST 26 DECETE 6.13016 ___ Change TITLE Add tion 6.3 STREET ADORESS STREET ADDRESS

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 angual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the cognitive 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

6.4 CITY - \$1 - 21P

SIGNATURE

City - ST- 7P