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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000011345 (2)

AUTO MALL STORAGE, INC.

Mailing Address

FILED Mar 31 1997 8:00am Secretary of State



551 SOUTH MILITARY TRAIL WEST PALM BEACH FL 33415			551 SOUTH MILITARY TRAIL WEST PALM BEACH FL 33415-3901				
					3. Date Incorporated or Qualified 02/09/1995	3a. Date of L 04/15/19	
2. Principal I	Place of Business	2a. Mailing Address			4. FEI Number	<u>'</u>	Applied For
21		26	26		65-0733691	Not Applicable	
Surte, Apt #, etc 22		Suite, Apt. #, etc 27	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Ζφ 29	30 Cour	ntry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes X Yes No		
	g. Name and Address of Cu	urrent Registered Agent			10. Name and Address of New Re	gistered Agent	
TH	OMPSON, DOUGLAS E			B1 Name			
GAS GOUTH MILITARY TRAIL Guite g West Palm Beach Fe 33413				45	dress (P.O. Box Number is Not Acceptable) 24 GUN CLUB ROAD ITE 101		
				84 City	ST PALM BEACH.		Zip Code 3 3 4 1 5
11. Pursuan office or agent. I	to the provisions of Sections 607 registered agent, or both, in the s am familiar with, and acceptathe of	7.0502 and 607.1508, Florida S State of Florida. Such change obligations.of, Section 607.050	Statutes, the ab was authorized 05, Florida State	ove-named con by the corpora ites.	rporation submits this statement for the pation's board of directors. I hereby accep	urpose of chang t the appointme	ing its registered nt as registered
SIGNATURE	Signature, typed or proper name of registers	ed agent and title if applicable	Dougla (NOTE: Registered	Agent signature requ	ompson uired when reinslating)	03/19/97 DATE	
12.		S AND DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICE		
TITLE	DPS Staluppi, John	DELET		.		L Cha	ange L Addition
NAME STREET ADDRESS	COLO LUI PELDU TOLII		1.2 NA	HEET ADDRESS			
CHY-ST-Z#	WEST PALM BEACH FL 3	3415		Y-ST-ZIP			
TITLE		DELET				Chi	ange Addition
NAME			2.2 NA	ME			
STREET ADDRESS			2.3 \$1	REET ADDRESS			
CiTY+ST-ZIP			2. 4 CI	ry-St-ZIP			
TITLE		DELET	E 3.1 TIT	LE		Cha	ange
NAMÉ			3.2 NA	ME			
STREET ADDRESS			3.3 ST	REET ADDRESS			
CITY - ST - ZiP				IY-ST-ZIP			
TITLE		DELET	E 4.1 T)Y	LE		∐ Cha	ange L. Addition
NAME			4. 2 N/				
STREET ADDRESS				REET ADDRESS			
CHTY-ST-7IP		Tacier	~	Y-ST-ZIP		T 05.	Addition
TITLE		☐ DELET				L Cha	ange L_ Addition
NAME	1		5.2 NA				
STREET ADDRESS				REET ADDRESS			
STREET ADDRESS DITY-ST-ZIP		∏ ngi ET	5.4 CIT	Y-ST-ZIP		T ch	ange Addition
STREET ADDRESS DITY-ST-ZIP TITLE		☐ DELET	5.4 CIT E 6.1 TIT	Y-ST-ZIP LE		☐ Ch	ange Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DÉLET	5.4 CII E 6.1 TIT 6.2 NA	Y-ST-ZIP LE ME		☐ Ch:	ange 🔲 Addition
STREET ADDRESS DITY-ST-ZIP TITLE		☐ DELET	5.4 CII E 6.1 TIT 6.2 NA 6.3 STI	Y-ST-ZIP LE		Chi	ange Addition

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 chapter 607 or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Staluppi President

03/19/97

(561{}avi}683.7100