SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT** # 1. Corporation Name P95000043560 (8) ENTERPRISE AUTO CENTER, INC. Principal Place of Business Mailing Address 1680 W. 31ST PL 1680 W. 31ST PL HIALEAH FL 33012 HIALEAH FL 33012 3. Date Incorporated or Qualified 3a. Date of Last Report 06/06/1995 Principal Place of Business 2. 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country $Z_{\rm ID}$ Country 8. This corporation has liability for intangible tax under s. 199 032, 24 25 29 Yes No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CHAN, WILSON 1680 W. 31ST PL. 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33012 84 City Zip Code 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Stgred insity fed or product case of registered agest and title if applicable (NOTE: Be pistered Agent signature regioned wtich remistrying) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (3/96) TITLE PD DELETE 1 I TIFLE Change Addition **CHAN, WILSON** NAME T 2 NAME 1680 W. 31ST PL STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 33012 CITY - ST - ZIP 1.4 CITY - ST - ZIP TITLE DELFTE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CHY+ST ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY-S1-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(TY - ST - Z)P TITLE DELETE 5.1 TETLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 \$1REET ADDRESS CITY - ST - ZIP 5.4 CITY-S1-ZIP TITLE DELETE 000001880986^{mge} 🗌 Addition 61 TITLE -07/01/96--01055--029 ***225.00 NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY - ST - ZIP 64 CHY+ST-ZIP 14. If 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 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 office or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes and that my name appears in Block 12 if they is if changed or pan attachment with an address

DUI PROJECT NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: