

**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

APPROVED AND FILED

97 AUG -4 AM 8:04

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P95000047562 (0)

1. Corporation Name  
NOPTON CAR CARE CORPORATION



Principal Place of Business: 1565-C N.W. 88TH AVE. MIAMI FL 33172  
Mailing Address: 1565-C N.W. 88TH AVE. MIAMI FL 33172-2603

3. Date Incorporated or Qualified: 06/19/1995  
3a. Date of Last Report: 08/22/1996  
4. FEI Number: 65-0589343  
Applied For:  Applied For,  Not Applicable  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes,  No

2. Principal Place of Business: 21 Suite, Apt. #, etc., 22 City & State, 23 Zip, Country, 24  
2a. Mailing Address: 26 Suite, Apt. #, etc., 27 City & State, 28 Zip, Country, 29, 30

9. Name and Address of Current Registered Agent  
PONTON, IVAN  
1565-C N.W. 88TH AVE.  
MIAMI FL 33172

10. Name and Address of New Registered Agent  
81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, FL, 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 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
TITLE: D, NAME: PONTON, IVAN, STREET ADDRESS: 1565-C N.W. 88TH AVE., CITY-ST-ZIP: MIAMI FL 33172  
[DELETED ROWS]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP: 800002261508--4 -08/08/97--01065--010 \*\*\*\*165.00 \*\*\*\*165.00  
[DELETED ROWS]

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.

CR2E034 (9/96)

*Handwritten signature/initials*

*Handwritten text at bottom right*