FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P95000052868 (3) DOCUMENT # CARS "4" SALE, INC. Principal Place of Business Mailing Address 4651 SHERIDAN STREET 4651 SHERIDAN STREET SUITE 300 SUITE 300 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 3. Date Incorporated or Qualified 3a. Date of Last Report 07/10/1995 2. Pyricipal Place of Business 11 4000 No LLY WOOD SIVD Mailing Address BLYWOOD BIND 4 FELNumber Applied For Not Applicable Suite, Apt. #380W \$8.75 Additional 5. Certificate of Status Desired Fee Required State Y NOOD City & State +WOOD 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Horida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GAMBERG, JAY FOOD AND FELLY UNDOUS NOT ASSOVED **4651 SHERIDAN STREET** SUITE 300 SUITE 350 N HOLLYWOOD FL 33021 XXXXXW002 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agrici soir uture recurred when reinstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1. 1 TillsE Change Addition GAMBERG, JAY 1.2 NAME 4000 HOW WOOD RIVD HOLLYWOOD FI 33021 4651 SHERIDAN ST SUITE 300 STREET ADDRESS 13 STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2 1 TIFLE Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 City - S1 - ZiP DELETE 3 1 TITLE ☐ Change Addition 3.2 NAME STREET ADDRESS 3.3 STHEET ADDRESS CITY-ST-ZIP 3.4 CITY - ST- ZIP DECETE 4 : TITLE Addition Change 4 2 NAME STREET ADDRESS 4.3 STREE: ADDRESS CITY-ST-ZIP 4.4 City - ST - ZIP DELETE 5. 1 TITLE Change ☐ Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - S1 - ZIP DELETE 6 1 TITLE 900001760385° -03/28/96--01017--004 ***200.00 6.2 NAME STREET ADDRESS 63 STREET ADDRESS C(1Y+S1-7)P 64 CITY-ST-ZIP 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 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.

12.

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)