

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 FEB 26 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # P95-000053637
1. Corporation Name
Mufflers 4 Less II, INC.

Principal Place of Business: 460 S. State Rd. 7, Hollywood, FL 33023
Mailing Address: 3235 N.W. 123 Terr, Sunrise, FL 33323

2. Principal Place of Business: 21 460 S State Rd. 7, 22 State Apt # etc, 23 Hollywood, FL, 24 33023, 25 USA
2a. Mailing Address: 26 3235 N.W. 123 Terr., 27 State Apt # etc, 28 Sunrise, FL, 29 33323, 30 USA

3. Date Incorporated or Qualified: 7-12-95
3a. Date of Last Report: N/A
4. FEI Number: [] Applied For, [X] Not Applicable
5. Certificate of Status Desired: [X] \$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, [X] No

9. Name and Address of Current Registered Agent
Jonathan Tabraue
460 S. State Rd. 7
Hollywood, FL 33023

10. Name and Address of New Registered Agent
81 Name: Alexandra Tabraue
82 Street Address (P.O. Box Number is Not Acceptable): 3235 N.W. 123 Terr.
83
84 City: Sunrise, FL, 85 Zip Code: 33323

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: Alexandra Tabraue, DATE: 2-23-96

12. OFFICERS AND DIRECTORS
1. TITLE: V/T/S/D, NAME: Jonathan Tabraue, STREET ADDRESS: 460 S. ST. RD 7, CITY-ST-ZIP: Hollywood, FL 33023
2. TITLE: P/D, NAME: Daniel Tabraue, STREET ADDRESS: 3235 N.W. 123 Terr., CITY-ST-ZIP: Sunrise, FL 33323
3. TITLE: [] DELETE
4. TITLE: [] DELETE
5. TITLE: [] DELETE
6. TITLE: [] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE: V/S/D, 1.2 NAME: Alexandra Tabraue, 1.3 STREET ADDRESS: 3235 N.W. 123 Terr., 1.4 CITY-ST-ZIP: Sunrise, FL 33323
2.1 TITLE: [] Change, [] Addition
2.2 NAME: [] Change, [] Addition
2.3 STREET ADDRESS: [] Change, [] Addition
2.4 CITY-ST-ZIP: [] Change, [] Addition
3.1 TITLE: [] Change, [X] Addition, 3.2 NAME: Robert Durden, 3.3 STREET ADDRESS: 14145 NE 8 Ave, 3.4 CITY-ST-ZIP: North Miami, FL 33161
4.1 TITLE: [] Change, [] Addition
4.2 NAME: [] Change, [] Addition
4.3 STREET ADDRESS: [] Change, [] Addition
4.4 CITY-ST-ZIP: [] Change, [] Addition
5.1 TITLE: [] Change, [] Addition
5.2 NAME: [] Change, [] Addition
5.3 STREET ADDRESS: [] Change, [] Addition
5.4 CITY-ST-ZIP: [] Change, [] Addition
6.1 TITLE: [] Change, [] Addition
6.2 NAME: [] Change, [] Addition
6.3 STREET ADDRESS: [] Change, [] Addition
6.4 CITY-ST-ZIP: [] Change, [] Addition

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.

SIGNATURE: Alexandra Tabraue, DATE: 2-23-96, (954)7484536

CR2E034 (12/95)