


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

**FILED**

**Mar 11 1997 8:00am**  
**Secretary of State**

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS																	
<b>DOCUMENT # P95000066674</b> <small>1. Corporation Name</small> <b>VALUE AUTO INC.</b>																			
<small>Principal Place of Business</small> <b>4010 South State Road 7</b> <b>Miramar, Florida 33169</b>		<small>Mailing Address</small> <b>4010 South State Road 7</b> <b>Miramar, Florida 33169</b>																	
<small>2. Principal Place of Business</small> <b>21 Same</b>		<small>2a. Mailing Address</small> <b>26 Same</b>																	
<small>22 City &amp; State</small> <b>27</b>		<small>28 City &amp; State</small> <b>29</b>																	
<small>23 Zip</small> <b>24</b>		<small>25 Country</small> <b>29</b>																	
<small>24</small>		<small>30</small>																	
<small>9. Name and Address of Current Registered Agent</small> <b>Gilbert Palau</b> <b>4010 S. State Road 7</b> <b>Miramar, Fla 33169</b>		<small>10. Name and Address of New Registered Agent</small> <b>81 Name</b> <b>82 Street Address (P.O. Box Number is Not Acceptable)</b> <b>83</b> <b>84 City</b> <b>FL</b> <b>85 Zip Code</b>																	
<small>11. Article 11 of 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, 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.</small>																			
<small>SIGNATURE</small> <small>(NOTE: Registered Agent's signature required when re-registering)</small>																			
<small>12. OFFICERS AND DIRECTORS</small> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> <b>Gilbert Palau President</b>  <b>4010 S. State Road 7</b>  <b>Miramar, Fla 33169</b> </td> <td style="width: 50%; text-align: right;"> <input type="checkbox"/> DELETE         </td> </tr> <tr> <td> <b>Maria Palau Secretary</b>  <b>4010 S. State Road 7</b>  <b>Miramar, Fla 33169</b> </td> <td style="text-align: right;"> <input type="checkbox"/> DELETE         </td> </tr> </table>		<b>Gilbert Palau President</b> <b>4010 S. State Road 7</b> <b>Miramar, Fla 33169</b>	<input type="checkbox"/> DELETE	<b>Maria Palau Secretary</b> <b>4010 S. State Road 7</b> <b>Miramar, Fla 33169</b>	<input type="checkbox"/> DELETE	<small>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</small> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> <b>11 TITLE</b>  <b>12 NAME</b>  <b>13 STREET ADDRESS</b>  <b>14 CITY- ST- ZIP</b> </td> <td style="width: 50%; text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td> <b>21 TITLE</b>  <b>22 NAME</b>  <b>23 STREET ADDRESS</b>  <b>24 CITY- ST- ZIP</b> </td> <td style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td> <b>31 TITLE</b>  <b>32 NAME</b>  <b>33 STREET ADDRESS</b>  <b>34 CITY- ST- ZIP</b> </td> <td style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td> <b>41 TITLE</b>  <b>42 NAME</b>  <b>43 STREET ADDRESS</b>  <b>44 CITY- ST- ZIP</b> </td> <td style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td> <b>51 TITLE</b>  <b>52 NAME</b>  <b>53 STREET ADDRESS</b>  <b>54 CITY- ST- ZIP</b> </td> <td style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td> <b>61 TITLE</b>  <b>62 NAME</b>  <b>63 STREET ADDRESS</b>  <b>64 CITY- ST- ZIP</b> </td> <td style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> </table>		<b>11 TITLE</b> <b>12 NAME</b> <b>13 STREET ADDRESS</b> <b>14 CITY- ST- ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>21 TITLE</b> <b>22 NAME</b> <b>23 STREET ADDRESS</b> <b>24 CITY- ST- ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>31 TITLE</b> <b>32 NAME</b> <b>33 STREET ADDRESS</b> <b>34 CITY- ST- ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>41 TITLE</b> <b>42 NAME</b> <b>43 STREET ADDRESS</b> <b>44 CITY- ST- ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>51 TITLE</b> <b>52 NAME</b> <b>53 STREET ADDRESS</b> <b>54 CITY- ST- ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>61 TITLE</b> <b>62 NAME</b> <b>63 STREET ADDRESS</b> <b>64 CITY- ST- ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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<small>14. I 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 contained 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.</small>																			
<b>SIGNATURE: Maria Palau</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>Secretary</b> <small>Date</small> <b>3-1-97</b> <b>987-8258</b> <small>City/Time/Phone #</small>																	

CR2E034 (9/96)