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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000080832 (5)

CAR STORE OF ALTAMONTE, INC.

1380 EAST ALTAMONTE DRIVE 1980 EAST ALTAMONTE DRIVE ALTAMONTE SPRINGS FL 32701 ALTAMONTE SPRINGS FL 32701 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 59-3335139 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zį́p 8. This corporation owes or has paid the current year intangible Yes 25 29 30 Personal Property Tax due June 30. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KHANJAHANBAKHSH, A R 1380 EAST ALTAMONTE DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) ALTAMONTE SPRINGS FL 32701 63 84 City 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE KHANJAHANBAKHSH, A R 12 NAME NAME 1380 EAST ALTAMONTE DRIVE STREET ADDRESS 1.3 STREET ADDRESS **ALTAMONTE SPRINGS FL 32701** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE GAGLIARD, BEVERLY M 2.2 NAME NAME 1380 E ALTAMONTE DR 2.3 STREET ADDRESS STREET ADDRESS **ALTAMONTE SPRINGS FL 32714** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change ___ Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS

CITY-ST-ZIP 14. Thereby 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 1 hanged, or on an altachment with an address.

3.4. CITY - ST - ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY - \$1 - 7IP

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE 5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

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Addition

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Addition

Change

Change

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FILED

Jan 23 1998 8:00am

Secretary of State