

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

FILED

Jan 28 1998 8:00am  
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |                                                         | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS  |  |
| DOCUMENT # P95000083927 (0)<br>1. Corporation Name<br>SUNCOAST MOTOR CENTER, INC.                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                   |                                                         |                                                                                                     |  |
| Principal Place of Business<br>8755 PARK BLVD.<br>SEMINOLE FL 34647                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                   | Mailing Address<br>8755 PARK BLVD.<br>SEMINOLE FL 34647 |                                                                                                     |  |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | 2a. Mailing Address                                                               |                                                         | 3. Date Incorporated or Qualified                                                                   |  |
| 21 Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | 26 Suite, Apt. #, etc.                                                            |                                                         | 11/01/1995                                                                                          |  |
| 22 City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | 27 City & State                                                                   |                                                         | 4. FEI Number                                                                                       |  |
| 23 Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | 28 Zip                                                                            |                                                         | 59-3345161                                                                                          |  |
| 24 Country                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 29 Country                                                                        |                                                         | Applied For                                                                                         |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         | Not Applicable                                                                                      |  |
| 9. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         | 5. Certificate of Status Desired                                                                    |  |
| BOGGS, E. JACKSON<br>501 E. KENNEDY BLVD.<br>SUITE 1700<br>TAMPA FL 33602                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                   |                                                         | <input type="checkbox"/> \$8.75 Additional Fee Required                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         | 6. Election Campaign Financing                                                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         | <input type="checkbox"/> \$5.00 May Be Added to Fees                                                |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         | <input type="checkbox"/> Yes <input type="checkbox"/> No                                            |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         | 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                   |                                                         |                                                                                                     |  |
| 12. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                   |                                                         |                                                                                                     |  |
| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                   |                                                         |                                                                                                     |  |
| 1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                   |                                                         |                                                                                                     |  |
| 1.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                   |                                                         |                                                                                                     |  |
| 1.3 STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                   |                                                         |                                                                                                     |  |
| 1.4 CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         |                                                                                                     |  |
| 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                   |                                                         |                                                                                                     |  |
| 2.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                   |                                                         |                                                                                                     |  |
| 2.3 STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                   |                                                         |                                                                                                     |  |
| 2.4 CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         |                                                                                                     |  |
| 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                   |                                                         |                                                                                                     |  |
| 3.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                   |                                                         |                                                                                                     |  |
| 3.3 STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                   |                                                         |                                                                                                     |  |
| 3.4 CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         |                                                                                                     |  |
| 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                   |                                                         |                                                                                                     |  |
| 4.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                   |                                                         |                                                                                                     |  |
| 4.3 STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                   |                                                         |                                                                                                     |  |
| 4.4 CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         |                                                                                                     |  |
| 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                   |                                                         |                                                                                                     |  |
| 5.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                   |                                                         |                                                                                                     |  |
| 5.3 STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                   |                                                         |                                                                                                     |  |
| 5.4 CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         |                                                                                                     |  |
| 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                   |                                                         |                                                                                                     |  |
| 6.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                   |                                                         |                                                                                                     |  |
| 6.3 STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                   |                                                         |                                                                                                     |  |
| 6.4 CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                         |                                                                                                     |  |

SIGNATURE: \_\_\_\_\_

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