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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

| Principal Place of Business | Mailing Address |
|-----------------------------|-------------------------|
| 5001 NORTH STATE ROAD 7 | 5001 NORTH STATE ROAD 7 |
| TAMARAC FL 33319 | TAMARAC FL 33319 |

FILED Feb 18 1998 8:00am Secretary of State

1998 DIVISION OF CORPORATIONS DOCUMENT # P96000020673 (5) A&D AUTO SERVICES, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/06/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0647215 21 26 Not Applicable Suite. Apt #, etc \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 29 30 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name DROSSOS, ANGELO 11811 N.W. 36TH PLACE Street Address (P.O. Box Number is Not Acceptable) 82 SUNRISE FL 33323 RI 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, typed or printed mone of registered agent and the if applicable (NCITE Flegistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change TITLE DELETE 1.1 TITLE Addition DROSSOS, ANTHONY 1.2 NAME NAME 11811 N.W. 36TH PLACE STREET ADDRESS 13 STREET ADDRESS SUNRISE FL 33323 CITY-ST-7/P 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE DROSSOS, SUSAN NAME 2.2 NAME 11811 N.W. 36TH PLACE STREET ADDRESS 2.3 STREET ADDRESS SUNRISE FL 33323 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE DROSSOS, ANGELO NAME 3.2 NAME 11811 N.W. 36TH PLACE STREET ADDRESS 3.3 STREET ADDRESS SUNRISE FL 33323 34 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STHEET ADDRESS CITY - ST - ZIP 4.4 CITY - ST- ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 THLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 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 supplienced at 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 preview or true tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

0291064 Daytime Phone #