


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

FILED

May 22 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northrup</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P96000051990 (5)</b>					
1. Corporation Name <b>DJ'S QUALITY CARS, INC.</b>					
Principal Place of Business <b>508 BRIDLE PATH CASSELBERRY FL 32707</b>			Mailing Address <b>508 BRIDLE PATH CASSELBERRY FL 32707-3140</b>		
2. Principal Place of Business 21 <b>2544 So. French Ave</b> Suite, Apt. #, etc. 22 <b>SANford FL</b> City & State 23 <b>32773</b> Zip Country		2a. Mailing Address 26 <b>2544 So. French Ave</b> Suite, Apt. #, etc. 27 <b>SANford, FL 32773</b> City & State 28 Zip Country		3. Date Incorporated or Qualified <b>06/18/1996</b> 3a. Date of Last Report	
24		25		29	
9. Name and Address of Current Registered Agent <b>AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134</b>			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 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					
14. I do 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 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: <b>REQUIRED</b> <b>4/28/97</b> <b>(407) 302 0036</b>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2E034 (9/96)