


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

FILED

Feb 05 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000069432 (8)

1. Corporation Name  
CITY AUTO RESOURCES, INC.

Principal Place of Business 1655 PALM BEACH LAKES BLVD. SUITE 510 WEST PALM BEACH FL 33401	Mailing Address 1655 PALM BEACH LAKES BLVD. SUITE 510 WEST PALM BEACH FL 33401-2208
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/20/1996		3a. Date of Last Report N/A	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number 65-0694123		Applied For Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country		29. Country		30. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent FHS CORPORATE SERVICES, INC. 11780 U.S. HIGHWAY ONE NORTH PALM BEACH FL 33411				10. Name and Address of New Registered Agent			
81. Name				82. Street Address			
83. City & State				84. Zip Code			
85. State				86. 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 E. P. McGinty V.P. DATE 1/7/97

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE <input type="checkbox"/> DELETE				11. TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME				S/C			
STREET ADDRESS				Robert Cuillo			
CITY-ST-ZIP				1296 N Lakeway, Palm Beach, FL 33480			
TITLE <input type="checkbox"/> DELETE				21. TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME				D			
STREET ADDRESS				Jay Botchmann			
CITY-ST-ZIP				565 Taxter Rd, New York, NY 10523-2300			
TITLE <input type="checkbox"/> DELETE				31. TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME				P/O			
STREET ADDRESS				Kevin Baumann			
CITY-ST-ZIP				2500 Presidential Way #404			
TITLE <input type="checkbox"/> DELETE				34. CITY-ST-ZIP			
NAME				West Palm Beach, FL 33401			
STREET ADDRESS				41. TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
CITY-ST-ZIP				V			
TITLE <input type="checkbox"/> DELETE				42. NAME			
NAME				William H. Ritts III			
STREET ADDRESS				1160 Coral Way			
CITY-ST-ZIP				44. CITY-ST-ZIP			
TITLE <input type="checkbox"/> DELETE				51. TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME				V			
STREET ADDRESS				James Shelton			
CITY-ST-ZIP				421 Birch St			
TITLE <input type="checkbox"/> DELETE				54. CITY-ST-ZIP			
NAME				Macclenny, FL 32063			
STREET ADDRESS				61. TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
CITY-ST-ZIP				V			
TITLE <input type="checkbox"/> DELETE				62. NAME			
NAME				Edmond P McGinty			
STREET ADDRESS				1400 Village Blvd. # 615			
CITY-ST-ZIP				West Palm Beach, FL 33409			

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: E. P. McGinty V.P. DATE 1/7/97 561 7129000

CR2E034 (9/96)