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PROFIT CORPORATION ANNUAL REPORT

1997

information indicated on this annual reportant an officer or director of the corporate

Michael W. McDonald

President

appears in Block 12 or

SIGNATURE: X



FLORIDA DEPARTMENT OF STATE

FILED

Apr 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000079599 (2)

AUTO-N-SPEC INC. Mailing Address Principal Place of Business SAK RWIF X NUCXIMICKINSA C/O DAVID A KING, ATTORNEY 1416 KINGSLEY AVENUE ORGANICE XPICAL PROCESSIONSX ORANGE PARK FL 32073-4509 3. Date Incorporated or Qualified 3a. Date of Last Report 09/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable Regency Walk Plaza 26 59-3403946 Suite, Apt #, etc \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 10240 Atlantic Blvd. City & State 6. Election Campaign Financing \$5.00 May Be Jacksonville , Fix Trust Fund Contribution Added to Fees Florida 28 Ζıρ Country This corporation has liability to e tax under s. 199.032, Yes V No 25 U.S.A 29
9. Name and Address of Current Registered Agent Florida Statutes 24 32225 30 10. Name and Address of New Registered 4 81 Name KING. DAVID A ESQ. 1416 KINGSLEY AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **ORANGE PARK FL 32073** 83 84 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 Superfuse typest or present the contregistated agent and little flapplicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE Change THEF 11TITLE MCDONALD, MICHAEL W NAME 1.2 NAME 1826 WESTON CIRCLE STREET ADDRESS 1.3 STREET ADDRESS **ORANGE PARK FL 32073** 1.4 CITY - ST- ZIP Officer 7P DELETE Change Addition TITLE 2.1 TITLE SHANNON, CHERRYL W 22 NAME MALIF 612 CHIVAS COURT STREET ADDRESS 2.3 STREET ADDRESS ORANGE PARK FL 32073 2 4 CITY - ST - ZIP 007Y-S7-79 DELETE Change Addition THE 3.1 TITLE NAMI 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS (-11-51-AP 3.4. CHTY - ST - ZIP DELETE Change Addition 4 1 TITLE TOTAL 4. 2 NAME NAM 4.3 STREET ADDRESS STREET ADORESS CDY ST 701 4.4 CITY - ST - ZIP DELETE Change Addition 1 111 5.1 TITLE HAMI 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY - \$1 - 761 5.4 CITY-ST-ZIP Change DELETE Addition THUE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

cupplemental annext report is true and accurate and that my signature shall have the same legal effect as if made under oath; that or yet regiver or trusts impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name