

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

**FILED**  
**Jun 29 1998 8:00am**  
**Secretary of State**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                   |                                                       |                                                                                                           |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--|
| <b>PROFIT CORPORATION ANNUAL REPORT 1998</b>                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |                                                       | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |  |
| <b>DOCUMENT #</b> <i>p97000107840</i>                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                   |                                                       |                                                                                                           |  |
| 1. Corporation Name<br><i>BAYOU TINTING &amp; DETAILING, INC.</i>                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                   |                                                       |                                                                                                           |  |
| Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                   | Mailing Address                                       |                                                                                                           |  |
| <i>8100 PARK BLVD, #101, PINECLAS PARK, FL 33781</i>                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                   |                                                       |                                                                                                           |  |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                |  | 2a. Mailing Address                                                               |                                                       | 3. Date Incorporated or Qualified                                                                         |  |
| 21 Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 26 Suite, Apt. #, etc.                                                            |                                                       | 12/24/97                                                                                                  |  |
| 22 City & State                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 27 City & State                                                                   |                                                       | 4. FEI Number                                                                                             |  |
| 23 Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 28 Zip                                                                            |                                                       | 59-3487357                                                                                                |  |
| 24 Country                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | 29 Country                                                                        |                                                       | 30                                                                                                        |  |
| 9. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                   | 10. Name and Address of New Registered Agent          |                                                                                                           |  |
| <i>STEVE STRUTHERS</i><br><i>8100 PARK BLVD #101</i><br><i>PINECLAS PARK, FL 33781</i>                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                   | 81 Name                                               |                                                                                                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                   | 82 Street Address (P.O. Box Number is Not Acceptable) |                                                                                                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                   | 83                                                    |                                                                                                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                   | 84 City                                               |                                                                                                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                   | 85 Zip Code                                           |                                                                                                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                   | FL                                                    |                                                                                                           |  |
| 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)                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                   |                                                       |                                                                                                           |  |
| 12. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                   |                                                       |                                                                                                           |  |
| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                   |                                                       |                                                                                                           |  |
| 1.1 TITLE <input type="checkbox"/> DELETE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                        |  |                                                                                   |                                                       |                                                                                                           |  |
| 1.2 NAME <i>STEVE STRUTHERS</i>                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                   |                                                       |                                                                                                           |  |
| 1.3 STREET ADDRESS <i>8100 PARK BLVD, #101,</i>                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                   |                                                       |                                                                                                           |  |
| 1.4 CITY- ST- ZIP <i>PINECLAS PARK, FL 33781</i>                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                   |                                                       |                                                                                                           |  |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                   |                                                       |                                                                                                           |  |

14. I 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:**

*STEVE STRUTHERS* 6/6/98 813-544-2886

CR2E034 (10/97)