


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

FILED  
May 07, 1999 8:00 am  
Secretary of State

05-07-1999 90154 040 \*\*\*158.75

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S94208

1. Corporation Name

KING MOTOR CENTER OF DEERFIELD, INC.

Principal Place of Business  
1441 S. FEDERAL HWY  
DEERFIELD BEACH FL 33441

Mailing Address  
700 E. SUNRISE BLVD.  
FT LAUDERDALE FL 33324



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 11/14/1991	
4. FEI Number 65-0350734		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KING, LOUIS W.	1.2 NAME	
STREET ADDRESS	1441 S. FEDERAL HWY	1.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL	1.4 CITY-ST-ZIP	
TITLE	DV <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KING, W. CLAY	2.2 NAME	PD KING, W. CLAY
STREET ADDRESS	1441 S. FEDERAL HWY	2.3 STREET ADDRESS	700 E. SUNRISE BLVD.
CITY-ST-ZIP	DEERFIELD BEACH FL	2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33304
TITLE	VT <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANCIS, KIRK J.	3.2 NAME	FRANCIS, KIRK J.
STREET ADDRESS	1441 S. FEDERAL HWY	3.3 STREET ADDRESS	700 E. SUNRISE BLVD.
CITY-ST-ZIP	DEERFIELD BEACH FL	3.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33304
TITLE	VD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	APPLEBY, EDWARD	4.2 NAME	
STREET ADDRESS	441 S. FEDERAL HWY	4.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL	4.4 CITY-ST-ZIP	
TITLE	VS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GALE, JEFFREY M	5.2 NAME	
STREET ADDRESS	700-900 E SUNRISE BLVD	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33304	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	TJ FRIEDEL, RONALD J.
STREET ADDRESS		6.3 STREET ADDRESS	700 E. SUNRISE BLVD.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33304

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, with all other like empowered.

SIGNATURE:

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/99

Date

954-527-3713

Daytime Phone #

CR2E034 (11/98)