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

CITY-ST-ZIP

Apr 28 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V20421 (6)AUTO FINANCE OF SOUTH FLORIDA, INC. Principal Place of Business Mailing Address 216 N. MILITARY TRAIL PO BOX 8200 WEST PALM BEACH FL 33415 JUPITER FL 33415 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/09/1992 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 65-0325501 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \(\sigma\) No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent ZARETSKY, RICHARD P. 1655 PALM BEACH LAKES BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 900** 63 W PALM BEACH FL 33401 84 City Zip Code 85 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, typed or pointed name of registered agent and title if applicable (NCI1) Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DÉLETE Change Addition TITLE 1.1 TITLE YOUNG, RITA J. 1.2 NAME NAME 371 RIVER EDGE ROAD STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 2.1 TITLE YOUNG, DONALD R. NAME 22 NAME STREET ADDRESS 371 RIVER EDGE RD. 23 STREET ADDRESS CITY-ST-ZIP **JUPITE**R FL 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CHY-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 it changed, or on an attachment with an address.

FILED