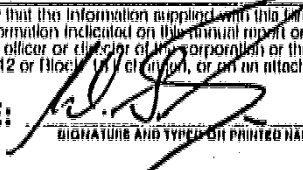


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS	
DOCUMENT # V62030		(4)		95 JAN 31 PM 2:02	
1. Corporation Name VERNCAR, INC.					
Principal Place of Business 14399 SOUTHWEST SANDWEDGE DRIVE INDIANTOWN FL 34956		Mailing Address 14399 SOUTHWEST SANDWEDGE DRIVE INDIANTOWN FL 34956		DO NOT WRITE IN THIS SPACE.	
2. Principal Place of Business 21 1040 Jensen Beach Blvd.		2a. Mailing Address 26		3. Date Incorporated or Qualified 09/03/1992	
Suite, Apt. #, etc. 22 Jensen Beach, FL		Suite, Apt. #, etc. 27		3a. Date of Last Report 02/10/1994	
City & State 23 34957		City & State 28		4. FEI Number 65-0359826	
Zip 24		Country 25		Applied For Not Applicable	
				5. Certificate of Status Desired \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No	
9. Name and Address of Current Registered Agent SCHOETZIG, WERNER B. 14399 S.W. SANDWEDGE DRIVE INDIANTOWN FL 34956				10. 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 reappointing) DATE					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY - ST - ZIP					
2.1 TITLE					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY - ST - ZIP					
3.1 TITLE					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY - ST - ZIP					
4.1 TITLE					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY - ST - ZIP					
5.1 TITLE					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY - ST - ZIP					
6.1 TITLE					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY - ST - ZIP					
14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13, or on an attachment with an address.					
SIGNATURE:  Werner B. Schoetzig 1/25/95 (407) 334-6565					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					