

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

FILED

**May 01 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000000543 (9)
1. Corporation Name
HAG AUTOMOTIVE INVESTMENTS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: **6000 MONROE ROAD, SUITE 100 CHARLOTTE NC 28212**
Mailing Address: **6000 MONROE ROAD, SUITE 100 CHARLOTTE NC 28212**

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City, State, Zip, and Country.

3. Date Incorporated or Qualified: **02/18/1993**
4. FEI Number: **56-1794981**
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 owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent: **THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301**
10. Name and Address of New Registered Agent (B1-B5) fields.

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 photocopied of registered agent and the applicable date) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTCD	1.1 TITLE	PRESIDENT / TCD
NAME	HENDRICK, J R	1.2 NAME	J.C. PERKINS
STREET ADDRESS	6000 MONROE ROAD, SUITE 100	1.3 STREET ADDRESS	6000 MONROE ROAD, SUITE 100
CITY-ST-ZIP	CHARLOTTE NC 28212	1.4 CITY-ST-ZIP	CHARLOTTE, NC 28212
TITLE	VS	2.1 TITLE	
NAME	MUSGRAVE, W O	2.2 NAME	
STREET ADDRESS	6000 MONROE ROAD, SUITE 100	2.3 STREET ADDRESS	
CITY-ST-ZIP	CHARLOTTE NC 28212	2.4 CITY-ST-ZIP	
TITLE	VAS	3.1 TITLE	
NAME	HUZZ, JAMES F	3.2 NAME	
STREET ADDRESS	6000 MONROE ROAD, SUITE 100	3.3 STREET ADDRESS	
CITY-ST-ZIP	CHARLOTTE NC 28212	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

W.O. MUSGRAVE 4/17/98 (704) 568-5550

CR2E034 (10/97)