

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 28 PM 3:00

DOCUMENT # **K24741** (6)
1. Corporation Name
A-1 DETAILING, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
**C/O JAMES S. NAFZINGER
3040 GULF TO BAY BLVD., SUITE 200-A
CLEARWATER FL 34619**

3. Date Incorporated or Qualified **05/23/1988** 3a. Date of Last Report **03/16/1994**
4. FEI Number **59-2919719** 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc 26 Suite, Apt. #, etc
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Country 30

9. Name and Address of Current Registered Agent
**NAFZINGER, JAMES S.
NAFZINGER ASSOCIATES, INC.
3040 GULF TO BAY BLVD., SUITE 200-A
CLEARWATER FL 34619**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS
TITLE **D**
NAME **MILLER, DOUGLAS M.**
STREET ADDRESS **3080 HILLSIDE LANE**
CITY - ST - ZIP **SAFETY HARBOR FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME **D. Miller, Douglas M**
1.3 STREET ADDRESS **18515 Deason Dr**
1.4 CITY - ST - ZIP **Spring Hill FL 34610**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(2)(b), 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. 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: *Douglas Miller* 3-22-95 813448-2522
DATE: _____