COMMONWEALTH OF KENTUCKY BREMER EHRLER - SECRETARY OF STATE - (502) 564-2848 P. D. 30X 1150 FRANKFORT. KY 40602-1150

09/01/89

STATE OF INCORPORATION: DELAWARE RECORD NO. 064079 CORPORATE NAME: LOUISVILLE GARAGE CORPORATION

REGISTERED AGENT AND ADDRESS:

PRINCIPAL OFFICE ADDRESS:

WILLIAM A. REISERT 1707 BARDSTOWN ROAD LOUISVILLE, KY. 40205-1211

1 RIVERFRONT PLAZA 602 LOUISVILLE, KY. 40202

WARNING - CORPORATION SUBJECT TO ADMINISTRATIVE DISSOLUTION OR REVOCATION OF CERTIFICATE OF AUTHORITY

- _XX_THIS CORPORATION HAS FAILED TO FILE WITH THE SECRETARY OF STATE THE 1989 ANNUAL VERIFICATION REPORT REQUIRED BY KENTUCKY LAW
- _XX_THE CORPORATION MAY FILE THE DELINQUENT ANNUAL REPORT BY SIGNING THIS FORM. ENCLOSING FILING FEE OF \$15.00 AND RETURNING TO THIS OFFICE AT THE P.O. BOX 1150 ADDRESS ASOVE. IF THE PRINCIPAL DEFICE ADDRESS (MAILING ABORESS) SET OUT ABOVE IS NOT CORRECT. PLEASE CROSS OUT INCORRECT INFORMATION AND WRITE IN CORRECT INFORMATION.
- _XX_KENTUCKY LAW NOW REQUIRES ANNUAL REPORTS TO INCLUDE THE NAMES AND BUSINESS ADDRESS OF CORPORATIONS DIRECTORS AND PRINCIPAL OFFICERS. THE LINES BELOW HAVE BEEN PROVIDED FOR THIS INFORMATION. IF NECESSARY PLEASE ATTACH A CONTINUATION SHEET. PROFESSIONAL SERVICE CORPORATIONS PER KRS 274-105 ARE STILL REQUIRED TO LIST THE NAMES AND ADDRESSES OF ALL SHAREHOLDERS IN ADDITION TO THE DIRECTORS AND PRINCIPAL OFFICERS AND THE PRESI DENT OF THE CORPORATION MUST SIGN AT BOTTOMODAS

EF THE CORPORATION DOES NOT COMPLY WITH THE RELEVANT PROVISIONS OF KY LAW BY FILING ITS 1989 ANNUAL REPORT. THE SECRETARY OF STATE SHALL ADMINISTRATIVELY DISSOLVE THE CORPORATIONS CHARTER OR REVOKE ITS CERTIFICATE OF AUTHORITY WITHEN SIXTY 1601 DAYS OF THE DATE OF THIS NOTICE.

I DECLARE THAT THE ABOVE INFORMATION IS TRUE AND CORRECT. I FURTHER DECLAPS THAT I AM AUTHOPIZED TO SIGN FOR THIS CORPORATION. LAUTHORIZED SIGNATURE LINE APPLIES TO ALL CORPORATIONS)

AUTHORIZED	SIGNATURE_	TITLE	TELEPHONE

(PROFESSIONAL SERVICE CORPORATIONS ONLY) I THE UNDERSIGNED. BEING PRESIDENT OF THE KRS CHAPTER 274 CORPORATION. DO HEREBY CERTIFY THAT ALL THE SHARFHOLDERS OF THE SAID CORPORATION. NOT LESS THAN ONE HALF OF THE DIRECTOPS. AND ALL OFFICERS OTHER THAN SECRETARY AND TREASURER, ARE DULY QUALIFIED AS PROVIDED IN CHAPTER 274.

PRESIDENTS	SIGNATURE	SHLY	6444
DKF2IDEM12	2 COMMISSION	Cond.	