

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

FILED

Apr 09 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 # F01209 (8)  
1. Corporation Name  
ACTION MOTORS, INC.

Principal Place of Business  
2720 N 08 TRAIL  
KISSIMMEE FL 34744  
US

Mailing Address  
2720 N 08 TRAIL  
KISSIMMEE FL 34744  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/01/1980	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2026795	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	


9. Name and Address of Current Registered Agent HOUCHINS, MARION 2590 FLAMBOYAN ST KISSIMMEE FL 34744		10. Name and Address of New Registered Agent	
		81 Name	Roy O. Houchins
		82 Street Address (P.O. Box Number is Not Acceptable)	2590 Flamboyant St
		83	
		84 City	Kissimmee FL
		85 Zip Code	34744

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE 3-4-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO HOUCHINS, ROY 2590 FLAMBOYAN ST KISSIMMEE FL	1.1 TITLE	POD
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	SD HOUCHINS, JUNE 2500 W PATRICK ST KISSIMMEE FL	2.1 TITLE	YB
NAME		2.2 NAME	Houchins, Marion
STREET ADDRESS		2.3 STREET ADDRESS	7550 Hinson St, #90
CITY - ST - ZIP		2.4 CITY - ST - ZIP	Orlando, FL 32819
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		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.

SIGNATURE:  DATE 3-4-98 407-847-7300

CR2E034 (10/97)