

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 2:21

DOCUMENT # **P94000023074 (5)**

1. Corporation Name

SIGNATURE MOTOR CARS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**6229 US HWY 19
NEW PORT RICHEY FL 34652**

Mailing Address

**6229 US HWY 19
NEW PORT RICHEY FL 34652**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/25/1994

3a. Date of Last Report

2. Principal Place of Business

21 State Apt # etc

22 City & State

24

25

26. Mailing Address

27 State Apt # etc

28 City & State

29

30

4. FEI Number

59-3231734

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 § 112.031,
Florida Statutes. Yes No

9. Name and Address of Current Registered Agent

**SPANOLIOS, JAMES J
36358 US HWY 19TH N
SUITE 15
PALM HARBOR FL 34684**

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 607.001 and 607.0508 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 this appointment as registered agent. I am familiar with and accept the disposition of Sections 607.001 and 607.0508 Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12.1 TITLE	12.2 NAME	12.3 STREET ADDRESS	12.4 CITY, STATE, ZIP
DP	BRYANT, ETHEL G	6229 US HWY 19	NEW PORT RICHEY FL 34652

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	13.2 NAME	13.3 STREET ADDRESS	13.4 CITY, STATE, ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and correct and accurate for the information stated in Sections 112.031 and 112.032 Florida Statutes. I further certify that the information included on the corporation's annual report is true and accurate and that my signature shall have the same legal effect as if such person really had signed and filed on this behalf the corporation or this in front of a duly commissioned notary public. This report as required by Chapter 400, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or in an affidavit filed with an address.

SIGNATURE:

Ethel G. Bryant
SIGNATURE AND TYPED OR PRINTED NAME

Ethel G. Bryant
SIGNING OFFICER OR DIRECTOR

4-28-95 (013) 841-9339