

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

FILED

**Mar 27 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # P95000054945 (7)

1. Corporation Name
UNITED AMERICAN MOTORS, INC.



Principal Place of Business
**1575 AVIATION CENTER PKWY
SUITE 514
DAYTONA BEACH FL 32114
US**

Mailing Address
**7031 GRAND NATIONAL DRIVE
SUITE 106-B
ORLANDO FL 32819-8905**

3. Date Incorporated or Qualified **07/13/1995** 3a. Date of Last Report **02/19/1996**

2. Principal Place of Business
21 **DAYTONA BEACH FL** 2a. Mailing Address
26 **7031 grand national dr**

4. FEI Number **59-1459027** Applied For
Not Applicable

Suite, Apt. #, etc. **407** 27 **106B**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State **daytona beach fl,** 28 **orlando fl**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

Zip **32114** Country 29 **32819** 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**ALBASHRAWI, ABDULLAH
7031 GRAND NATIONAL DRIVE
SUITE 106-B
ORLANDO FL 32819**

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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	ALBASHRAWI, ABDULLAH
STREET ADDRESS	7031 GRAND NATIONAL DRIVE, SUITE 106-B
CITY - ST - ZIP	ORLANDO FL 32819
TITLE	D <input type="checkbox"/> DELETE
NAME	ALBASHRAWI, AHMED
STREET ADDRESS	7031 GRAND NATIONAL DRIVE, SUITE 106-B
CITY - ST - ZIP	ORLANDO FL 32819
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 or on an attachment with an address.

SIGNATURE: *Abdullah*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.24.1997
DATE

CR2E034 (9/96)