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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 29 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 180737

(9)

DAVIS MOTORS INC.

Principal Place of Business				Mailing Address					- I FOR IDI IIADI HUII EDEH HUUNG HUII		AND HOLD IN	A GADAN NOTA
2806 N.E. SOTH STREET FT. LAUDERDALE FL 33306			2806	2806 N.E. 30TH STREET FT. LAUDERDALE FL 33306-1839								
	·								3. Date Incorporated or Qualifie 09/25/1954		ate of Last /09/1996	• •
2. Principal Place of Business				2a. Mailing Address					4. FEI Number		1/	applied For
			26						59-0756718	· · · · · · · · · · · · · · · · · · ·		lot Applicable
			27					*****	5. Certificate of Status Desired			Additional Regulred
City & State			<del></del>	City & State					6. Election Campaign Financing	_		May Be
			28						Trust Fund Contribution			to Fees
Zip <b>24</b>	21		29	?ip	30	Country	<i>'</i>		8. This corporation has liability Florida Statutes	Yes	<b>⊠</b> No	s. 199.032,
		nd Address of Curren	nt Register	red Agent			1		10. Name and Address of New	Registered	Agent	
	NNING, MARJ					81	Na	ame				
2806 NE 30TH STREET FT. LAUDERDALE FL 33306							<u>L_</u>	treet Address (P.O. Box Number is Not Acceptable)				
						83						
						64	Ci	ty		Fl	85 Zip	Code
11. Pursuant	to the provision	ns of Sections 607 050	02 and 607	.1508, Florida Star	tutes, th	e abov	e-na	med corp	oration submits this statement for th	e numose d	t changing	its registered
office or r	registered ager	nt, or both, in the State i, and accept the obliga	e of Florida -	<ul> <li>Such change was</li> </ul>	is author	rized by	v the	corporation	on's board of directors. I hereby ac	cept the ap	pointment a	s registered
SIGNATURE		)			110.100.	J	<b>.</b>					
	Signature typed or	product han elof registered age				<del></del>	eni sig	nature require	ed when reinstating)	DATE		
12.		OFFICERS AN	D DIRECTO			13.		T	ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	PT	, MARJORIE T.		☐ DELETE	1	1.1 TITLE					L Change	Addition
NAME		, MARJORIE 1. BOTH STREET				1.2 NAME						
STREET ADDRESS	FT. LAUDE					1.3 STREET						
CITY-ST-7IP TITLE	VS	NUALE FL		DELETE		1.4 CITY-S	ST-ZIP				T Chases	Addition
		, HARVEY D., JR.		F"] nerete		2.1 TITLE					L Change	Addition
NAME EXPLICT APPROPRES		OTH STREET				2.2 NAME			•			
STREET ADDRESS	FT. LAUDE					2.3 STREET						
CHTY-ST-ZIP THTLE	V	NUALLIL		☐ DELETÉ		2. 4 CITY - 5 3.1 TITLE	SI - ZH	<del>-   -</del>		<del></del>	Change	Addition
NAME	SHAFF, CH	AFRYI A				3.1 111LE 3.2 NAME				- 2	L. Linkings	L_ Augusii
STREET ADDRESS		ESTH STREET				3.2 NAME 3.3 STREET	* ANNE	œcc ]				
CITY-ST-ZIP	FT. LAUDE											
TITLE	''	10/100 12		DELETE	_	3.4. GITY - 5 4.1 TITLE	51-20	<del></del>			Change	Addition
NAME	1			<b>_</b>		4. 2 NAME					La binny	Land Padaleon
STREET ADDRESS	1				I 7			1				
CITY - ST-2IP	1					. o clotti	TANNE	AEGC .				
	ļ					4.3 STREET 4.4 CITY - S						
TITLE				☐ DELETE	4.	4.3 STREET 4.4 CITY - S 5.1 TITLE					Change	Addition
				DELETE	4.	4.4 CITY - S 5.1 TITLE			······································		Change	☐ Addition
TITLE NAME				☐ DELETE	4. 5.	4.4 CITY - S 5.1 TITLE 5.2 NAME	ST-ZIP	,		——————————————————————————————————————	Change	☐ Addition
TITLE NAME STREET ADORESS				☐ DELETE	4. 5. 5.	4.4 CITY - S 5.1 TITLE 5.2 NAME 5.3 STREET	ST-ZIP	RESS		<del>- Welder der messell</del>	Change	☐ Addition
TITLE NAME				☐ DELETE	4. 5. 5. 5.	4.4 CITY - S 5.1 TITLE 5.2 NAME	ST-ZIP	RESS			☐ Change	☐ Addition
TITLE  NAME  STREET ADORESS  CITY-S7-ZIP					4. 5. 5. 5. 5.	4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	ST-ZIP T AOOR ST-ZIP	RESS				

14. I do 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: 23.97 954-513-9757

6.4 CHTY-ST-ZIP