

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 535392 (5)

1. Corporation Name

VICTORY MOTORS CORPORATION



Principal Place of Business

3001 N.W. 7TH AVE.
MIAMI FL 33127

Mailing Address

2212 NE 3 ST
MIAMI FL 33125
US

3. Date Incorporated or Qualified
05/12/1977

3a. Date of Last Report
02/16/1995

2. Principal Place of Business

21 2212 NW 3 ST.
Suite, Apt. #, etc.

2a. Mailing Address

26 2212 NW 3 ST.
Suite, Apt. #, etc.

4. FEI Number
59-1768825

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 s. 199.032,
Florida Statutes ☒ Yes ☐ No

City & State

23 MIAMI, FL
Zip 33125 Country US

City & State

28 MIAMI, FL
Zip 33125 Country US

9. Name and Address of Current Registered Agent

MONTALVO, ARMANDO
1401 PONCE DE LEON BLVD., SUITE 200
CORAL GABLES FL 33134

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

Signature, typed or printed name of registered agent and first initial

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.2 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.3 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.4 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.5 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.6 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.7 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.8 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.9 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.10 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.11 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
12.12 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY-ST-ZIP

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY-ST-ZIP

13.13 TITLE

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY-ST-ZIP

13.17 TITLE

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY-ST-ZIP

13.21 TITLE

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY-ST-ZIP

13.25 TITLE

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY-ST-ZIP

13.29 TITLE

13.30 NAME

13.31 STREET ADDRESS

13.32 CITY-ST-ZIP

13.33 TITLE

13.34 NAME

13.35 STREET ADDRESS

13.36 CITY-ST-ZIP

13.37 TITLE

13.38 NAME

13.39 STREET ADDRESS

13.40 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Victor M. Cardenal* Victor M. CARDENAL P15/r 1/16/96 305-373-3636
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)