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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 597242

(7)

ELITE MOTOR CARS, INC.

FILED Apr 23 1998 8:00am Secretary of State

4-10-98 1-813526-3880

Principal Place of Business Mailing Address				_		- 1			
6190 34TH STREET NORTH 6190 34TH STREET NORTH			4						
ST. PETERSBURG FL 33714		ST. PETERSBURG FL 33714				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
6 Deingingt D	lace of Business	Do Marina Address				12/13/1978	 -		
2, Frincipal P	ace or business	2a. Mailing Address				4, FEI Number	<u> </u>		plied For
Suite, Apt.	# etc.	Suite Apt. #, etc.	Suite, Apt. #, etc.			59-1868548	\$ 8		t Applicable additional
22	.,	27				5. Certificate of Status Desired	,		quired
City & State	e	City & State				6. Election Campaign Financing			May Be
23	28					Trust Fund Contribution			o Fees
Zip	Country	Zip	Country	y		8. This corporation owes or has paid the curr	ent ye	ar Inta	angible
24	25		30				≰ Yes		No No
	g. Name and Address of Curre	nt Registered Agent		т		10. Name and Address of New Registered A	gent		
	wery Jr, Douglas W		81		Name				
6190 34TH ST N				1	Street Addre	ess (P.O. Box Number is Not Acceptable)		-	
ST PETERSBURG FL 33714				1					
			83	1					
			84	1	City		85	Zip C	ode
- 44 B	40-40-607.05	00 1 002 4100 51-11-51		L		<u> </u>	11		
office or re	egistered agent, or both, in the State	e of Florida. Such change was aut	thorized by	y th	named corpo he corporatio	pration submits this statement for the purpose of on's board of directors. I hereby accept the appo	cnang ointme	ing its nt as r	registered registered
agent. La	m familiar with, and accept the obliq	gations of, Section 607.0505, Flori	da Statute:	S.					
SIGNATURE	Signature, typed or printed name of ingistered as	and anothin if anylicable (NO)E (Registered Age	Onl s	sonalure require	d when reinstating) DATE			
12,		ND DIRECTORS	13.	0146	s-gristare required	ADDITIONS/CHANGES TO OFFICERS AND	DIREC	CTORS	3 IN 12
TITLE	DP	☐ DELETE	1.1 TITLE	_			Cha		Addition
NAME	SUDDARTH, BENJAMIN F		1.2 NAME						
STREET ADDRESS	8375 SEMINOLE BLVD		1.3 STREET	T AD	DDRESS				
CITY-ST-ZIP	SEMINOLE, FL 00000		1.4 CITY - S	ST - 2	ZIP				
TITLE	DST	☐ DELETE	2.1 TITLE				Cha	ange	Addition
NAME	LOWERY, DOUGLAS W., JR.		2.2 NAME						
STREET ADDRESS	7326-11TH AVE NO.		2.3 STREET	T AD	ORESS				
CITY-ST-ZIP				ST-	ZIP				<u> </u>
TITLE		DELETE	3.1 TITLE				Cha	ınge	Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET	T AD	DRESS				
CITY-ST-ZIP		T access	3.4. CiTY -	ST-	ZiP		<u> </u>		1
TITLE		L_J DELETE	4.1 TITLE				Cha	inge	Addition
NAME			4.2 NAME		-				
STREET ADDRESS			4.3 STREET						
CITY-ST-ZIP		DELETE	4.4 CITY - S	<u>S1 - Z</u>	ZIP		1 Ch.		Addition
TITLE		C) biteli	5.1 TITLE		ļ		Cha	шãв	☐ Modificial
NAME OTREET ADDRESS			5.2 NAME		NDF-00				
STREET ADDRESS			5.3 STREET		1				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - S 6.1 TITLE	31-7	ZOP		Cha	ADDE	Addition
NAME			6.2 NAME			'		n igo	
STREET ADDRESS			6.3 STREET	r an	npree				ĺ
CITY-ST-ZIP			6.4 CITY - S						
14. I hereby o	ertify that the information supplied v	with this filing does not qualify for	the exemp	otio	n stated in S	Section 119.07(3)(i), Florida Statutes. I further cer	tify the	it the	information
indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same tegal 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.									