SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (if dissolved, minimum amount due to reinstate: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

643184

(5)

RICHARD	HALISER	MOTOR	CORP
	INUULII	MOIOII	OUTIF :

1.,,0	INID INC	SER WICTOR CO	· • •						
Principal F	lace of Business	3	Mailing) Address				- I INDIIR BIIA BAND IIAB IIAB IINII I	0181 0181 0181 0181 0181 0181 0181 0188 UFB
	OUTH DIXIE HWY L 33032	1		7 SOUTH DIXIE VII FL 33032	E HWY				
								3. Date Incorporated or Qualified 10/29/1979	3a. Date of Last Report 07/17/1995
	al Place of Busin	ess	2a. Ma	iling Address				4. FEI Number	Applied For
21			26					59-2050800	Not Applicable
22 Suite, A	Apt #, etc.		27	te, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City &	State		City	y & State		·		6. Election Campaign Financing	55.00 May Be
23	·····		28					Trust Fund Contribution	Added to Fees
Zip		Country	Zip		<u> </u>	untry	,	8. This corporation has liability for	
24	9 Name	and Address of Curr	29 ent Registerer	d Agent	[30]			Florida Statutes 10. Name and Address of New Re	
	,		one noglatere.	a ngoile		81	Name	10. Name and Address of New Yor	granted Agein
HAUSER, RICHARD									
23737 SOUTH DIXIE HIGHWAY				82	Street Addre	ress (P.O. Box Number is Not Acceptable)			
	MIAMI FL 33	189				83			
						84	City	 	85 Zip Code
						107	City		FL Stp Code
office	or registered an	ions of Sections 607 09 ent, or both, in the Sta th, and accept the obli	le of Elorida, Si	uch change w:	as authorize	d by	the corporation	oration submits this statement for the pr in's board of directors. I hereby accept	urpose of changing its registered tithe appointment as registered
SIGNATUI		ALAMAN PANTAN AND A SAME AN AT THE SAME AND A SAME AND							
10	Signature typed	or printed non a of registered a	igent and title if appl IND DIRECTOR	 			ent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DAIF
12.	PD	OFFICENS P	MODINECTO	DELETE	13.	TITLE	——— <u>—</u> ——	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	1	ER, RICHARD				NAME			
STREET ADDR		S. DIXIE HWY.					ADDRESS		
CITY - ST - ZIP	MIAMI					City-S			
TITLE	D	 	*** ***********************************	DELETE		THTLE			Change Addition
NAME	HAUSI	ER, PATRICIA			2.2	NAME			
STREET ADDR		S. DIXIE HWY.			23	STREET	ADDRESS		
CITY - ST - ZIP	MIAM	FL			2.4	CITY -	ST ZIP		
TITLE	VD			DELETE	31	TITLE			Change Addition
NAME		er, Bryan			32	NAME			
STREET ADDR		S DIXIE HWY					ADDRESS		
City-St-Zip	MAM	FL		T DELETE			ST - ZIP		
TITLE				DELETE	1	TITLE			Change Addition
NAME						NAME			
STREET ADDR	į.						I ADDRESS		
CITY-ST-ZIP				DELETE	····	CITY - S TITLE	5T - ZIP		Change Addition
NAME				[_] beech		NAME			T evende T vacation
STREET ADDR	FSS						T ADDRESS		
CITY-ST-ZIP	1						ST - ZIP		
TITLE				DELETE		TITLE	- EP		Change Addition
NAME						NAME			
STREET ADOR	ESS						I ADDRESS		
CITY-ST-2IP							S1 - 21P		
14. I do l	eraby certify tha	it the information supplinformation indicated	red with this for	ing is voluntari	ily furnished	and	does not quali	ly for the exemption stated in Section and accurate and that my signature sha	119.07(3)(k), Florida Statutes. I

4. I do heraby certify that the information supplied with this firing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k), Florida Statutos. 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 in an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed or on an all chiment with an address.

SIGNATURE: /

7.49.96 30525813