

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

**FILED**  
**Feb 24, 1999 8:00 am**  
**Secretary of State**

02-24-1999 90110 025 \*\*\*150.00

UNASCAL

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **643184**

1. Corporation Name  
**RICHARD HAUSER MOTOR CORP.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business : Mailing Address  
 23737 SOUTH DIXIE HWY 23737 SOUTH DIXIE HWY  
 MIAMI FL 33032 MIAMI FL 33032

3. Date Incorporated or Qualified  
**10/29/1979**

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

4. FEI Number Applied For  
**59-2050800** Not Applicable

22 City & State 27 City & State

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

23 Zip Country 28 Zip Country

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

24 25 29 30

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HAUSER, RICHARD**  
**23737 SOUTH DIXIE HIGHWAY**  
**MIAMI FL 33032**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	<b>PD</b>	
NAME	<b>HAUSER, RICHARD</b>	
STREET ADDRESS	<b>23737 S. DIXIE HWY.</b>	
CITY-ST-ZIP	<b>MIAMI FL 33032</b>	
TITLE	<b>D</b>	
NAME	<b>HAUSER, PATRICIA</b>	
STREET ADDRESS	<b>23737 S. DIXIE HWY.</b>	
CITY-ST-ZIP	<b>MIAMI FL 33032</b>	
TITLE	<b>VD</b>	
NAME	<b>HAUSER, BRYAN</b>	
STREET ADDRESS	<b>23737 S DIXIE HWY</b>	
CITY-ST-ZIP	<b>MIAMI FL 33032</b>	
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		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I 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, with all other like empowered.

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

2-16-99 305 258-1311  
 Date Daytime Phone #

CR2E034 (11/98)