

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Feb 25, 1999 8:00 am  
Secretary of State

02-25-1999 90010 013 \*\*\*150.00

DOCUMENT # 644065

1. Corporation Name  
FRIENDLY MOTORS, INC.

Principal Place of Business  
2150 N.E. 163 STREET  
P O BOX 600070  
NORTH MIAMI BEACH FL 33160-7070

Mailing Address  
2150 N.E. 163 STREET  
P O BOX 600070  
NORTH MIAMI BEACH FL 33160-7070

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/05/1979

4. FEI Number

59-1950026

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

BOWER, GARY  
2150 NE 163RD STREET  
NORTH MIAMI BEACH FL 33162

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PCB  
NAME BOWER, WILLIAM J JR.  
STREET ADDRESS 2150 N E 163 ST  
CITY-ST-ZIP N MIAMI BCH FL

TITLE VPST  
NAME BOWER, WILLIAM J. I  
STREET ADDRESS 2198 N.E. 163 STREET  
CITY-ST-ZIP N.MIAMI BEACH FL

TITLE D  
NAME MORSE, EDWARD J SR  
STREET ADDRESS 2150 N E 163 ST  
CITY-ST-ZIP N MIAMI BCH FL

TITLE VP  
NAME BOWER, GARY  
STREET ADDRESS 2150 N.E. 163RD ST.  
CITY-ST-ZIP N MIAMI BCH FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CB  
1.2 NAME BOWER, William J. JR  
1.3 STREET ADDRESS 2150 NE 163 ST  
1.4 CITY-ST-ZIP N. MIAMI BCH, FL 33162

2.1 TITLE VPST  
2.2 NAME Bower, William J. III  
2.3 STREET ADDRESS 2198 NE 163 ST  
2.4 CITY-ST-ZIP N. MIAMI BEACH, FL 33162

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE PRES.  
4.2 NAME BOWER, GARY  
4.3 STREET ADDRESS 2150 NE 163 ST  
4.4 CITY-ST-ZIP N. MIAMI BCH, FL 33162

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)