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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 657012

(1)

BEE MOTORS, INC.

Principal Place of Business

Mailing Address

10941 US HWY 441 LEESBURG FL 34788 10941 US HWY 441 LEESBURG FL 34788-8841

FILED Apr 25 1997 8:00am Secretary of State



3a. Date of Last Report

04/25/1996

3. Date Incorporated or Qualified

03/01/1980

Sulin, Apt. #, etc. Sulin, Apt. #, etc.	2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
City & State Country Zip Country Zip Country Zip Signate NORVELL, Michael C., ESO. P.O. Box 491615 Registered Agent NORVELL MICHAEL C., ESO. P.O. Box 491615 Registered Agent NORVELL MICHAEL C., ESO. P.O. Box 491615 Registered Agent Tity Fund Contribution Norwell Address of Current Registered Agent Norwell Registered Agent Norwell Registered Agent Norwell Registered Agent Norwell Registered Agent Tity Fund Contribution Norwell Registered Agent Norwell Registered Agent Norwell Registered Agent Tity Fund Contribution Norwell Registered Agent Norwell Registered Agent Norwell Registered Agent Tity Registered Address of New Registered Agent Norwell Registered Agent Tity Registered Address of New Registered Agent Tity Registered Address of New Registered Agent Norwell Registered Agent Tity Registered Address of New Registered Agent Tity Registered Agent Tity Registered Agent Tity Registered Address of New Registered Agent Tity Re	21					59-2002221		No	t Applicable
City & State City & State		in the second				5. Certificate of Status Desired	d \$8.75 Additional Fee Required		
Zip		City & State	State		6. Election Campaign Financing		\$5.00	May Be	
25						Trust Fund Contribution			
9. Name and Address of Current Registered Agent NORVELL, MICHAEL C., ESO. P.O. 80X 491615 82 Street Address (P.O. Box Number is Not Acceptable) 14 City FL 85 Zip Code 15 Pursuant to the provisions of Sections 607 0509 and 607 1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its register of agent, or both, in the State of Forida. Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registered agent, and section from the State of Forida. Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registered agent, and section from the provisions of Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE ST OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ST ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. City: S1-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. ADMIT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. ADMIT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADMIT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. SIRECT ADDRESS 14. CITY: S1-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADMIT ADDRESS 17. ADMIT ADDRESS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADMIT ADMIT ADDRESS 19. ADMIT ADDRESS TO OFFICERS AND DIRECTORS IN 12 19. ADMIT ADDRESS TO OFFICERS AND DIRECTORS IN 12 19. ADMIT ADMIT ADDRESS TO OFFICERS AND DIRECTORS IN 12 20. ADMIT ADDRESS T	Z ip	Country Zip				B. This corporation has liability for	intangible t	ax under s.	199.032,
NORVELL, MICHAEL C., ESQ. P.O. BOX 491615 LEESBURG FL 34749-1615 182 Street Address (P.O. Box Number is Not Acceptable) 183 Street Address (P.O. Box Number is Not Acceptable) 184 City FL 85 Zip Code 185 Zip Code 186 City FL 85 Zip Code 187 City FL 85 Zip Code 188 City FL 85 Zip Code 188 City FL 85 Zip Code 189 City FL 85 Zip Code 189 City FL 85 Zip Code 180 City FL 85 Zip Code 180 City FL 85 Zip Code 180 City FL 85 Zip Code 181 Name 182 City FL 85 Zip Code 183 City FL 85 Zip Code 184 City FL 85 Zip Code 185 Zip Code 285 Zip									
PO. BOX 491615 LEESBURG FL 34749-1615 182 Street Address (P.O. Box Number is Not Acceptable) 183			Registered Agent		,	10. Name and Address of New Re	gistered A	gent	
LEESBURG FL 34749-1615 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 register of significant forms of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heroby accept the appointment as register agent. I am familiar with, and accept the obligations of. Section 607 0505, Florida Statutes SIGNATURE SI					Name				
### City ###					82 Street Address (P.O. Box Number is Not Acceptable)				
### PL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registere agent are familiar with, and accept the obligations of, Section 607 0505, Florida Statules SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ANALE STREET ADDRESS SIRET ADDR	LEESBURG FL 34749-1615								
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 register office or registered agent, or both, in the Static of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 3505, Florida Statutes. SIGNATURE Signature, Upper de printed main of registered agent and still illustration. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TILE NAME ROBERTS, FRANCES, H 2902 ASH DR. 13. STREET ADDRESS LEESBURG FL. 34748 14. CITY-ST-2IP DELETE 1.1 TILE P DELETE 1.2 NAME 1.3 STREET ADDRESS LEESBURG FL. 34748 1.4 CITY-ST-2IP DELETE 2.2 NAME 2.2 NAME 2.2 NAME 2.2 NAME 3.2 STREET ADDRESS LEESBURG FL. 34748 1.2 NAME DELETE 3.3 TILE DELETE 1.3 TILE Change Add Change Ad									
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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 registere agent, am familiar with, and accept the obligations of, Sociotin 607 5055, Florida Statutus. SIGNATURE Signature, typed or printed name of registered agent, and talin it in publicable. (ACT). Registered Agent signature required when renationing.) DATE									
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Signature, typed of primed nerve of registered agent and title if insplacebox (NOTE, Tegasherer Agent agent agrent agrentate required when renatating) CATE	agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, Flo	rida Statutes	, and corporate 3.	on a poura of directors. Thereby accep	οι αιο αρρι	and mont as	ogiaterou
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14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. 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;	14. I do herel								