FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

810891

(2)

WEST Principal Place	SIDE MOTORS INC OF CL	EVELAND Mailing Address					
3825 COTTONWOOD DR. 3825 CO							
TITUSVILLE FL 32780		TITUSVILLE FL 32780 US		3. Date Incorporated or Qualified 03/21/1956		of Last Report 4/11/1995	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26		59-0789855		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc		5. Certificate of Status Desired	П	\$8.75 Additional	
22		27				Fee Required	
City & State		City & State		6. Election Campaign Financing		\$5.00 May Be Added to Fees	
23		Zip Country			Trust Fund Contribution	intancible ta	
<i>Ζ</i> φ	Z ₁ ρ Country Z ₁ ρ 25 29		30		R. This corporation has liability for intangible tax under s 199.032, Florida Statutes		
24	9 Name and Address of Curren				10. Name and Address of New F		Agent
			81	Name			
ROSHA	ra, donald		62	Ctroot Add	ress (P.O. Box Number is Not Acceptab	ole)	
3825 COTTONWOOD DR			32	Street Add	1655	·	
	ILLE FL 32780						
***************************************	,		84	City		FL	85 Zip Code
44 Durayant	to the provisions of Spetions 607 0500	2 and 607 1508 Florida S	tatutes, the above-	hanied corod	ration submits this statement for the pu	mose of cha	inging its registered office
or rogistor	ad accet, or both, in the State of Figur	da. Suich change was a II.	hanzea by the car	oration's bos	and of directors. Thereby accept the app	ointment as	registered agent. Lam
familiar wit	th, and accept the obligations of, Sect	tion 607,0505, Horida Sta	tutes.				
SIGNATURE _	Stinature, typed or printed have of registerial agent	Land Have and Lace	(NŌTE Heyetere LÂg-	id signature bequir	ed where renemblating	DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTORS IN 12
TITLE	PD	☐ DELETE	1 1 TITLE			[Change 🔲 Addition
NAME	BOSHARA, DONALD		1.2 NAME				
STREET ADDRESS	3825 COTTONWOOD DR		1.3 STREE	LADORESS			
CITY-ST-ZIP	TITUSVILLE FL		1,4 C/TY -	S1-ZIP			-1 0
TITLE	VTD	☐ DEFELE	2 1 T∷TLF			ג	Change Addition
NAME	Boshara, Robert		2.2 NAME				
STREET ADDRESS	1606 W INDIAN SCHOOL R	D		ADDRESS .	BEOS W. ALABAMA HOUSTON, TX 770	#52	04
CITY-ST-ZIP	PHOENIZ AZ	ET BOLETO	2.4 CITY -		HOUSTON, TX 110	<u> </u>	Change Addition
TITLE	SD	☐ DELETE				1	
NAME	BOSHARA, MARGARET		3 2 NAME				
STREET ADDRESS	3825 COTTONWOOD DR			EL ADORESS			
CiTY-ST-Z-P	TITUSVILLE FL	DELÉTE	3.4 C/TY - 4.1 TI/LE				Change Addition
THILE			4.2 NAME			,	
NAME STOCET ADDRESS				T ADDRESS			
STREET ADDRESS CITY+ST-ZIP			4.4 CITY				
TITLE		DELETE					Change Addition
NAME			5.2 NAME				
STREET ADDRESS			53 STRE	T ADDRESS			
CITY - S1 - ZIP			5.4 CiTY -	ST-ZIP			
TITLE		☐ DELETE					Change 🔲 Addition
NAME			6.2 NAME				
STREET ADORESS			6.3 STRE	ET ADDRESS			
CITY-ST-ZIP			6.4 C(TY				
	Land that the information of police	with this files is voluntari	by furnished and do	oe not qualify	for the exemption stated in Section 119	4 OZ(3)(k), EI	orida Statutes. I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROSHANA 4-15-96 (407) 268:3384