

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F02000001721

1. Entity Name
NORTH AMERICAN BUS INDUSTRIES INC.



Principal Place of Business

**106 NATIONAL DRIVE
ANNISTON, AL 36207**

Mailing Address

**106 NATIONAL DRIVE
ANNISTON, AL 36207**

DO NOT WRITE IN THIS SPACE



08232004 No Chg-P CR2E034 (10/03)

4. FEI Number
52-1792099

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PAPY, CHARLES C III
DUANE, MORRIS & HECKSCHER, LLP
200 SOUTH BISCAYNE BLVD., SUITE 3410
MIAMI, FL 33131-2397**

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	RACZ, ANDRAS
STREET ADDRESS	11-1183 BUDAPEST, XVI, UJSZASZ U. 45
CITY-STATE-ZIP	HUNGARY,
TITLE	VPD
NAME	CORYELL, BILL
STREET ADDRESS	20350 VENTURA BLVD SUITE 205
CITY-STATE-ZIP	WOODLAND HILLS, CA
TITLE	ST
NAME	GARDNER, LISA
STREET ADDRESS	106 NATIONAL DRIVE
CITY-STATE-ZIP	ANNISTON, AL 36207
TITLE	V
NAME	GARRETT, DANIEL
STREET ADDRESS	106 NATIONAL DRIVE
CITY-STATE-ZIP	ANNISTON, AL 36207
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

U000000171123
08/30/04-80005-004 550.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lisa Gardner* *Corporation Secretary-Treasurer* 8/23/04 256-241-1334
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #