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

2001

*****	1330	Division C	CONTONATIONS			
DOCUI	MENT # F665	32 (5)				
ALITO	DMOTIVE ENTERPRISES, II	NC .				
AUIC	ANIOTIVE ENTENENISES, I	110.		A TRANSFER DATE AND A DISTRICT FOR A	Bula jiri anan anah anah anah	IAN ANDI ANDI ITAL
Principal Place	of Business	Mailing Address				
% RICHAR	D I HORD	% RICHARD L HOR	n			
P.O. BOX	422406	P.O. BOX 422406				
KISSIMMEE	E FL 34742-2405	KISSIMMEE FL 347	42-240 5	3. Date Incorporated or Qualified	3a. Date of Last	Report
		-		02/09/1982	02/28/1	1995
ì	ace of Business	2a. Mailing Address		4. FEI Number		Applied For
Suite, Apt.	# elc	26 Suite, Apt. #, etc.		59-2267712	00.7	Not Applicable
22	, oto.	27		5. Certificate of Status Desired		5 Additional Required
City & State	9	City & State		6. Election Campaign Financing		00 May Be
23		28		Trust Fund Contribution		ed to Fees
Z⁄p	Country	Ziρ	Country	B. This corporation has liability for	intangible tax under	s 199.032,
24	25	29	30	Florida Statutes Yes		
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New F	Registered Agent	
HORD, RICHARD L 2324 ROBERT COURT			82 Street Ac	82 Street Address (P.O. Box Number is Not Acceptable)		
			83			
MISSIN	AMEE FL 34741					
			84 City		FL 85 2	Zip Code
SIGNATURE _	Skyreture, typod or printed name of registered ege		OTE: Registured Agent signature requ	coration submits this statement for the pur coard of directors. I hereby accept the app affect when reinstating!	DATE	
12.	OFFICERS Af	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECT	ORS IN 12
TITLE	S	☐ DELETE	1. 1 TITLE		Change	ORS IN 12 Addition
NAME	HORD, RICHARD L		1.2 NAME			
STREET ADDRESS	2324 ROBERT COURT		1.3 STREET ADDRESS			
C-TY-ST-ZIP TITLE	KISSIMMEE, FL 00000	☐ DELETE	1.4 C(TY - ST - Z)P 2 1 T(TLE		☐ Change	Addition
NAME	D D		2 2 NAME		[] Guards:	☐ Addition
STREET ADDRESS	HORD, RICHARD W 1650 GRANADA BLVD		2.3 STREET ADDRESS			
CrTY-ST-ZiP	KISSIMMEE, FL 00000		2 4 CITY - ST - 2IP			
TOTLE	12000101010FF 1 T 75555	☐ DELETE	3. 1 TITLE		☐ Chang-:	Addition
NAMÉ			3.2 NAMÉ			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY - ST - ZIP			
TITLE		☐ DELETE	4. 1 TITLE		☐ Change	Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
TITLE		☐ DELETE	4.4 CHY-ST-ZIP 5. 1 TITLE		Change	[Addition
NAME		El perese	5.2 NAME			Addition
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-S1-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6. 1 TITLE		Changi	Addition
NAME		_	6.2 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CITY - ST - 2(P			6.4 CITY-ST-ZIP			
14 Ldo harah	w certify that the information supplied	with this filing is voluntarily fur	niched and door not qualify	for the exemption stated in Section 110	02/2014 Florido Ctat.	dea I finalisa

I do nereby 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 directed by the convortation or the receiver or bustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changes, or on an attachment with an address.

SIGNATURE: