

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
32399-0001

DOCUMENT # F93000004716 (7)

By Corporation Agent

EXOTIC MOTOR CARS LTD., INC.

SEMI-ANNUAL REPORT

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TALLAHASSEE, FLORIDA

Principal Office of Business
10 E. PALMETTO PARK ROAD-SUITE 103-140-
BOCA RATON FL 33432

Principal Office of Business
10 E. PALMETTO PARK ROAD-SUITE 103-140
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Organization 10/20/1993	3a. Date of Last Report 05/01/1994
4. FID Number 04-3110877	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contributions ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for additional tax under 1993 Code Florida Statutes ☒ Yes ☐ No	

2. Principal Office of Business 21. 20423 SR 7 State Apt # 427 22. #427 City & State 23. Boca Raton, FL	2a. Mailing Address 26. 20423 SR 7 State Apt # 427 27. #427 City & State 28. Boca Raton, FL
24. 33498	25. 33498

9. Name and Address of Current Registered Agent ALEXANDER, PAUL 10 E. PALMETTO PARK ROAD SUITE 103 & 104 BOCA RATON FL 33432	10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 20423 S.R. 7 #427 83. 84. City Boca Raton FL 85. Zip Code 33498
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11. Pursuant to the provisions of Sections 607, 608, and 609, Florida Statutes, this 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 609, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS BY 12
NAME DVT ALEXANDER, PAUL STREET ADDRESS 10 E. PALMETTO PARK ROAD #103-140 CITY & STATE BOCA RATON FL 33432	1. NAME 2. NAME 3. NAME 4. NAME 5. NAME 6. NAME 7. NAME 8. NAME 9. NAME 10. NAME 11. NAME 12. NAME 13. NAME 14. NAME 15. NAME 16. NAME 17. NAME 18. NAME 19. NAME 20. NAME 21. NAME 22. NAME 23. NAME 24. NAME 25. NAME 26. NAME 27. NAME 28. NAME 29. NAME 30. NAME 31. NAME 32. NAME 33. NAME 34. NAME 35. NAME 36. NAME 37. NAME 38. NAME 39. NAME 40. NAME 41. NAME 42. NAME 43. NAME 44. NAME 45. NAME 46. NAME 47. NAME 48. NAME 49. NAME 50. NAME 51. NAME 52. NAME 53. NAME 54. NAME 55. NAME 56. NAME 57. NAME 58. NAME 59. NAME 60. NAME 61. NAME 62. NAME 63. NAME 64. NAME 65. NAME 66. NAME 67. NAME 68. NAME 69. NAME 70. NAME 71. NAME 72. NAME 73. NAME 74. NAME 75. NAME 76. NAME 77. NAME 78. NAME 79. NAME 80. NAME 81. NAME 82. NAME 83. NAME 84. NAME 85. NAME 86. NAME 87. NAME 88. NAME 89. NAME 90. NAME 91. NAME 92. NAME 93. NAME 94. NAME 95. NAME 96. NAME 97. NAME 98. NAME 99. NAME 100. NAME

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law (see 1993 Code, Florida Statutes). I further certify that the information included on this statement is not an additional annual report or 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 liquidator empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this filing or as an attachment with an affidavit.

SIGNATURE: 4/25/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR