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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G27147

(9)

URFER MOTORS, INC.

FILED
May 02 1997 8:00am
Secretary of State

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| Principal Place of Business | | | | | | | | | |
|---|---|---|---|-----------------------|----------------------------|--|---------------------------|---------------------------------------|------------------------------|
| Principal Place of Business 3380 TAMIAMI TRAIL SUITE 8-1 PT CHARLOTTE FL 33952 | | 3380 TAMIAMI TRAIL SUITE B-1 | | | | | #1 8 11 8 1 | *** * **** ### | चन्द्रार प्रदर्भ |
| US | | us | US | | | 3. Date Incorporated or Qualified 03/09/1983 | | | |
| | lace of Business | 2a. Mailing Address | 2a. Mailing Address | | | 4. FEI Number | Applied For | | |
| 21 | 4 -1- | 26 | | | | 59-2269250 | | | |
| Suite, Apt. | #, BIC. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | | Additional |
| City & State | | City & State | City & State | | | Fee Required | | | |
| 23 | • | 28 | <u></u> | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| Zip | | | ountry 8. This corporation has liability for inte | | | intangible | | | |
| 24 | 25 | | | | | | Yes No | | |
| | 9. Name and Address of Cur | rent Registered Agent | | 1 | | 10. Name and Address of New R | gistered / | igent | |
| | BLE, J STEVEN | | | 81 | Name | | | | |
| | TAMIAMI TRAIL | | | | | dress (P.O. Box Number is Not Accepta | ble) | | |
| SUITE | HARLOTTE FL 33952 | | | 83 | | | | | |
| PIG | NAMED HE LE 00802 | | | 65 | | | | | |
| | | | | 84 | City | | FL | 85 Zip | Code |
| 11. Pursuant t office or re agent. I ar | lo the provisions of Sections 607. egistered agent, or both, in the St m familiar with, and accept the ot | 0502 and 607.1508, Florida St ale of Florida. Such change w bligations of, Section 607.0505 | atutes, the al as authorized , Florida Stat | bove d by tutes | r-named cor the corpora | poration submits this statement for the ation's board of directors. I hereby acce | ourpose of pt the appo | changing i | its registered registered |
| SIGNATURE . | Signature, typed or printed name of registered | | 0.001 | 57.25 | | | | | |
| 12, | | AND DIRECTORS | (NOTE Hogisteric | o Agei | iil signature regu | ared when reinstating) ADDITIONS/CHANGES TO OFF | DATE CERS AND | DIRECTO | RS IN 12 |
| TITLE | PD | DELETE | 1,1 10 | 1LE | | Noormond, of the latest to of the | OLINO AND | Change | Addition |
| NAME | URFER, JUEL | | 1.2 NA | AME | | | | _ • | |
| STREET ADDRESS | 3914 CENTER GATE CIRCLE | | 1.3 57 | 1.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | SARASOTA FL | | 1.4 CI | Ty - ST | r- ziP | | | | |
| TITLE | DELETE 2.1 | | 2.1 70 | 2.1 TITLE | | | | Change | Addition |
| NAME | | | 2.2 NA | AME | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP TITLE | | DELETE | | (1Y - S | 1-2IP | , | | | A 4 100 |
| NAME | | Office | 3.1 TI | | | | | L Change | Addition |
| STREET ADDRESS | | | 3.2 N/ | | ADDRESS | | | | |
| CITY-ST-ZIP | | | | ITY - SI | | | | | |
| TITLE | | DELETE | 4.1 TI | | . 111 | | | Change | Addition |
| NAME | | | 4. 2 N | AME | | | | | |
| STREET ADDRESS | | | 43 SI | REE1 A | ADDRESS | | | | |
| CITY-ST-ZIP | | | 4 4 CI | TY-ST | - Z1P | | | | |
| TITLE | | DELETE | 51111 | | | | | Change | Addition |
| NAME | | | 5.2 NA | AME | | | | | |
| STREET ADDRESS | | | 5.3 \$1 | REET # | ADDRESS | | | | |
| City-St-ZIP | | | 5.4 CF | | - ZIP | | ···· | | |
| TITLE | | DELETE | 6.1 Til | | | | | Change | Addition |
| NAME | | | 6.2 NA | | | | | | |
| STREET ADDRESS | | | 1 | | ADDRESS | | | | |
| CITY-ST-ZIP | | | 6.4 CI | 1Y - S1 | · ZIP | | | ··· · · · · · · · · · · · · · · · · · | |

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. 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.

December of common