FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortnam ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** FRANK SAMSON MOTORS, INC. Principal Place of Business 1827 9TH\ST W 1827 9TA ST.W BRANDENTON FL 34205 BRANDENTON FL 34205 US 3. Date Incorporated or Qualified 08/07/1984 3a. Date of Last Report US 05/01/1995 Applied For 4. FELNumber Mailing Address 2. Principal Place of Business 59-2494537 Not Applicable 1450 US301BLVDE 26 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 23 8. This corporation has liability for intangible tax under s. 199.032, Country Yes No Florida Statutes 30 MANATEE 29 10. Name and Address of New Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) KAKLIS, V.WILLIAM 82 701 11TH ST. W. **BRADENTON FL** Zip Code 84 City eckins 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lamingations of, Section 607,0805, Florida Statutes. Pursuant to the provisions of Se or registered agent, or both, in t nd accept the ob SIGNATURE CR2E034 (12/95) ar sa ji Agrata ji shiri الموالية المراد المعاولية المعاولية المراد ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELF IE 1 THEE SAMSON, FRANKLIN J. 1.2 NAME NAME 1.3 STREET ADDRESS 4912-801 BLVD. E STREET ADDRESS **BRADENTON FL** 1.4 CITY - ST - ZIP Addition Change City-St-7/P DELETE 2 1 JULE TITLE 2.2 NAME SAMSON, ARTHUR A. 2.3 STREET ADDRESS 4912 301 BLVD. E. STREET ADDRESS 2 4 C (TY - ST - Z-P BRADENTON FL Addition CITY - ST - ZIP Change DELETE 3.1 DEE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 Cli V - Si - ZIP ☐ Addition CITY-ST-ZIP Change DELETE 4. 1 TITLE TITLE 4.2 NAME NAME 4.3 STREE! ADDRESS STREET ADDRESS 4.4 CITY - \$1 - ZIP Change CITY-SI-ZIP ☐ Addition DELETE 5 1 7/10 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CHY \$1-7P City - ST - ZiP Addition DELETE 6 1 100LF TITUE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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 cath; that I am an officer or director office 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 or an attachment with an address. 64 Cilly - ST ZiP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR