FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT May 11 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # H59811 (0) PROPER MOTORS CARS, INC. Mailing Address Principal Place of Business 181141TH AVENUE NORTH 1811-11TH AVENUE NORTH ST. PETERSBURG FL 33713 ST. PETERSBURG FL 33713 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/24/1985 2. Principal Place of Business Mailing Address Applied For 59-2537162 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible Zip Yes 30 Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MCLEOD, PHILIP 600 1ST AVENUE NORTH Street Address (P.O. Box Number is Not Acceptable) 82 **SUITE #306** В3 ST. PETERSBURG FL 33701 84 Zip Code City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the 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 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or pented name of mystered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ Addition Change □ DELETE 1.1 TITLE TITLE RICHEY, DEWAYNE G., III 1.2 NAME NAME 796 VILLAGE LK TERRACE STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 1.4 CITY - ST - ZIP Change Addition DELETE 2.1 TITLE TITLE RICHEY, DEWAYNE G. 2.2 NAME NAME 835-51 WINDWARD DRIVE 2.3 STREET ADDRESS STREET ADDRESS **AURORA OH** 2. 4 CITY - ST- ZIP CITY-ST-ZIP ☐ Addition DELETE ☐ Change 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP Change DELETE Addition 5.1 TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE 61 TITLE Change Addition TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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 altachment with an address.

4-28-96

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