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PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam

Secretary of State DIVISION OF CORPORATIONS

1996

	MENT # H779 1 MOTORS INC.	l lêbindh bini loan loan ku				
Principal Place		Mailing Address				
	OLD GAINESVILLE RD.	6361 S E BABB ROAD 5230 N.W. OLD GAINE BELLEVIEW FL 34420 US		3. Date Incorporated or Qualified	I	Last Report
. Principal Pla	ace of Business	2a. Mai'ing Address		09/26/1985 4. FEI Number	(04/	14/1995
	SEBabb Road	9	E. Babble			Applied For
Suite, Apt. #		Suite, Apt. #, etc.	1, 1, 405 100			Not Applicable \$8.75 Additional
<u></u>		27		5. Certificate of Status Desired		Fee Required
Orty & State	leview Fl	City & State 28 Bellevia	ew Fl	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
3944 S	20 25 Marion	29 34420	Country 30 Manio	8. This corporation has liability for Florida Statutes Yes	intangible tax u	
	9. Name and Address of Curren		1-1 1 7-4, 10,	10. Name and Address of New F		ent
			81 Name			
	a, richard c.		82 Street A	ddress (P.O. Box Number is Not Acceptate	olei	
	E BABB ROAD					
BELLEV	1EW FL 34420		83			
			84 City			85 Zip Code
1 Purenant to	n the provisions of Costiana CO7 or on	and 007 4500 51-14-04	1 1 1			1
or registere	go agent, or both, in the State of Floric	da. Such change was authorize	ed by the corporation's b	poration submits this statement for the pu loard of directors. I bereby accept the app	ruose or chang controent as rec	ing its registered office
GNATURE _	Signature, types or printed name of registered agent	and the Lappinshie (NOT	id by the corporation's b	poration submits this statement for the pu loard of directors. I hereby accept the app menuter relistance	ointment as rec	ing its registered office gistered agent, I am
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to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: SIGNATURE AND TYPED O