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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J96247

(8)

HUSTON MOTORS, INC.

Principal Place of Business Mailing Address

FILED Feb 20 1998 8:00am Secretary of State

1655 US HWY 27 NORTH LAKE WALES FL 83853		1655 US HWY 27 NORTH LAKE WALES FL 33853			DO NOT WRITE IN THIS SPACE					
					3. Date Incorporated or Qualified 10/08/1987					
2.	Principal Place of Business	2a. Mailing Address			4. FEI Number Applied For					
1	· 	26			59-2580291 Not Applicable					
2	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required					
_	City & State	City & State			6. Election Campaign Financing \$5.00 May Be					
3]		28		_	Trust Fund Contribution Added to Fees					
	Zip Country	Zip	Cou		8. This corporation owes or has paid the current year Intangible					
4	26	29	30		Personal Property Tax due June 30. Yes No					
	g. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent					
HUSTON, SAMUEL D., JR					Name HUSTON SAMUET D TR Street Address (P.O. Box Number is Not Acceptable)					
1				82	·					
	LAKE WALES FL 33853		83 - 131 W		131 WYNDHAM DRIVE					
			ĺ	"						
				84	CHWINTER HAVEN FL 85 33886					
				L I.	F 35000					

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, typod or printed name of registered agent and trile if applicable. [NOTE; Registered Agent signature required when reinstating) DATE											
12.	OFFICERS AND DIR		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12								
TITLE	D	DELETE	1.1 TITLE	D	Change	Addition					
NAME	HUSTON, SAMUEL D., JR		1.2 NAME	HUSTON, SAMUEL D., JR.	- •	_					
STREET ADDRESS	1901 S. HIGHLAND PK DR		1.3 STREET ADDRESS	131 WYNDHAM DRIVE							
CITY-ST-ZIP	LAKE WALES FL		1.4 CITY - ST - ZiP	WINTER HAVEN, FL 33880							
TITLE	D	DELETE	2.1 TITLE	Ď	Change	☐ Addition					
NAME	HUSTON, TIMOTHY C.		2.2 NAME	TIMOIHY C. HUSION							
STREET ADDRESS	3800 ALTERNATE 27 SOUTH		2.3 STREET ADDRESS	3800 S. SCENIC HWY							
CITY-ST-ZIP	LAKE WALES FL		2. 4 CITY - ST - ZIP	LAKE WALFS, FL 33853							
TITLE		☐ DELETE	3.1 TITLE		☐ Change	Addition					
NAME			3.2 NAME								
STREET ADDRESS			3.3 STREET ADDRESS								
CITY-ST-ZIP			3.4. CITY-ST-ZIP								
TITLE		DELETE	4.1 TITLE		Change	Addition					
NAME			4. 2 NAME								
STREET ADDRESS			4.3 STREET ADDRESS								
CITY-ST-ZIP			4.4 DITY-ST-ZIP								
TITLE		☐ DELETE	5.1 TITLE		Change	Addition					
NAME			5.2 NAME								
STREET ADDRESS			5.3 STREET ADDRESS								
CITY-ST-ZIP			5.4 CITY - ST - ZIP								
TITLE		DELETE	6.1 TITLE		☐ Change	Addition					
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET ADDRESS								
CITY-ST-ZIP			6.4 CITY - ST - 7IP			1					

14. I hereby certify that the information supplied with this filling does not qualify for the examption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplier made under oath; that I am an officer or director of the corporation or provided examples 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 provided examples and that my name appears in Block 12 or Block 13 if changed on this anadoress.

SIGNATURE:

SAMUEL D. HUSTON, JR.

(941)676-0595

_____2/10/98