Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90117 046 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K88086

1. Corporation Name

DRAGON AUTOMOTIVE, INC.

Principal Place of Business Mailing Address						- I 18814111 ERL 16101 fürst delbt tölte eint enett étett eintr eintr eintr eintr eintr eintr eintr eintr eintr
75 N.W. 18TH AVE. 75 NW 18TH AVE. DELRAY BEACH FL 33444 DELRAY BEACH FL 33444						DO NOT WRITE IN THIS SPACE
US						3. Date Incorporated or Qualifed 05/15/1989
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21		26				65-0122285 Not Applicable
Suite, Apt. #, etc. 22 City & State		Suite, Apt. #, etc.				5. Certifcate of Status Desired \$8.75 Additional Fee Required
City & State	8	City & State			1 5 4 4 3	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country 25	Zip 30	Cou	ntry		This corporation owes the current year Intangible Personal Property Tax.
24	9. Name and Address of Current		<u>-</u> 1-			10. Name and Address of New Registered Agent
81 Name						•
Carry, Peggy L. 75 N.W: 18th Ave.				82	Street Addre	ss (P.O. Box Number is Not Acceptable)
DELRAY BEACH FL 33444				83		
				84	City	FL 85 Zip Code
Office or a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	if Florida. Such change was auth	ากrized	I DV t	ne corporation	ration submits this statement for the purpose of changing its registered o's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent	and title if explicable (NOTE: R	enistered	Agent	signature required	when reinstating) DATE
12.	OFFICERS AND		13.	· · · · · · ·		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	☐ DELETE	1.1 TII	TLE		☐ Change ☐ Addition
NAME	COX, DANIEL C.		1.2 NA	ME	Ì	
STREET ADDRESS	75 N.W. 18TH AVE.		1.3 \$7	REET.	ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL 33444		1.4 CI	TY-ST	-ZIP	·
TITLE		☐ DELETE	2.1 TT	TLE		☐ Change ☐ Addition
NAME			2.2 N	ME		
STREET ADDRESS			2.3 \$1	REET	ADDRESS	
CITY-ST-ZIP			2.4 C	ITY-ST	r- <u>ZIP</u>	· · · · · · · · · · · · · · · · · · ·
TITLE		DELETE	3.1 TF			☐ Change ☐ Addition
NAME					ADDRESS	
STREET ADDRESS				ITY-\$1		
TITLE		DELETE	4.1 T/		1-411	☐ Change ☐ Addition
NAME	· .		4.2 N			· .
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	the first state of the state of	·	1	TY-ST	i i	
TITLE	Grant Control	☐ DELETE	5.1 TI			Change ☐ Addition

CITY-ST-ZIP 14. 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 attachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

561-278-1653

☐ Change

☐ Addition