2002	2 UNIFORM BUSI	NESS REPORT	r (UBR)				•	an !	
DOCUMENT # L41155						• P*•		7	
1. Entity Name NORTH AMERICAN MOTORCARS, INC.									
					02 SEP 11 A	M 9: 3	38		
Principal Place of Business 3800 OVERSEAS HIGHWAY MARATHON FL 33050 Mailing Address 7110 E. CYPRESSHEAD DR. PARKLAND FL 33067				K	TALLAHASSEE, FLORIDA				
2. Principal Place of Business 3. Mailing Address 3. Suite, Apt. #, etc. 3. Mailing Address 3. Suite, Apt. #, etc. 3. Mailing Address 3. Suite, Apt. #, etc.			- "j-~	<u>~</u>	DO NOT WRITE IN	N THIS SP	ACE	OIL BIBIF IBOI	
City & Stat	omod Fe	City & State	TE	4. f	*: *El Number : 65-0272328			plied For	
Zip	Country	MARCOTO CO	ountry	5. (3.75 Add		
3505		<u></u>	100000	123	lame and Address of New Regis	Fe	e Require	<u> </u>	
	6. Name and Address of Current R	legistered Agent	Name	/. r	valle and Address of New Regis	stereu Ay	5111		
SAFFOURY, WILLIAM S. 7110 E CYPRESSHEAD DR				ress (P.O. Box Number is Not Acceptable)					
7110 E CY PARKLANI	,	•							
:			City			FL	Zip Code	9	
8. The above	named entity submits this statement for	the purpose of changing its regis	tered office or reals	stered ag	ent, or both, in the State of Florida				
				•					
SIGNATURE .	Signature, typed or printed name of registered agent ar	od title if applicable (NOTE: Regis	tered Agent signature requ	uired when re	instating)	DATE			
Tax filing a	oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! FE After May 1, 2002 Fe Make Check Payable to	e will be \$550.0		10. Election Campaign Finance Trust Fund Contribution.	ing		O May Be to Fees	
11.	OFFICERS AND D	DIRECTORS 1	12.	AD	DITIONS/CHANGES TO OFFICE	RS AND D	IRECTORS	S IN 11	
	PST SAFFOURY, WILLIAM S. 7110 E CYPRESSHEAD DR PARKLAND FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP		00000801 -09/25/02 ****150.	1 81 2010] Change 1 () — 580 ***15(
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			ITLE HAME STREET ADDRESS CITY-ST-ZIP] Change	Addition	
13. I hereby of indicated	certify that the information supplied with to on this report or supplemental report is to the control of the co	inis tilling does not quality for the e true and accurate and that my sig	exemption stated in inature shall have the	Section 1 he same l	। ।७.७७(३)(।), Florida Statutes. I furf legal effect as if made under oath	iner certify : that I am	an officer	ormation or director	

indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

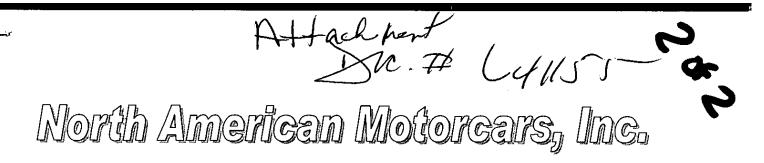
SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date



Wednesday, September 04, 2002

Pat Baily FLORIDA DEPARTMENT OF STATE P. O. Box 1500 Tallahassee, FL 32302-1500

Dear Pat:

Please accept my apology on the late filing for the UBR as luck has it that my neighbor who was terminally ill has had the form delivered to him by error while he was going through treatment. Only, upon his passing that his daughter in law found the document and left the form out in the weather to be soaked and wet from pouring rain.

Apparently they must have had the form for months until found by his family member. Your help is greatly appreciated.

Sincerely,

WilliamSaffoury

William S. Saffoury

President