FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 19 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L99682** **(1)**

1. Corporation Name

VIVA MOTOR SALES, INCORPORATED

Principal Place of Business	Mailing Address
4000 W COLONIAL DR ORLANDO FL 32808	4000 W COLONIAL DR ORLANDO FL 32808

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 09/12/1990
3a. Date of Last Report: 04/29/1994

21 2. Principal Place of Business	213 Churchill Drive
22 Suite, Apt. #, etc.	Longwood Fl.
23 City & State	
24 Zip / 25 Country	32779 / USA
26 2a. Mailing Address	
27 Suite, Apt. #, etc.	213 Churchill Drive
28 City & State	Longwood Fl.
29 Zip / 30 Country	32779 / USA

4. FEI Number: 59-3025100 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FOX, GARRICK N
2002 E. ROBINSON ST.
ORLANDO FL 32803

10. Name and Address of New Registered Agent

81 Name: Johann P. Friedrich
82 Street Address (P.O. Box Number is Not Acceptable): 213 Churchill Drive
83
84 City: Longwood **FL** 85 Zip Code: 32779

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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] Johann P. Friedrich 4-17-95
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PT	1.1 TITLE		☐ Change ☐ Addition
NAME	FRIEDRICH, JOHANN P.	1.2 NAME		
STREET ADDRESS	213 CHURCHILL DR	1.3 STREET ADDRESS		
CITY-ST-ZIP	LONGWOOD FL	1.4 CITY-ST-ZIP		
TITLE	VS	2.1 TITLE		☐ Change ☐ Addition
NAME	FRIEDRICH, EVA-MARIA	2.2 NAME		
STREET ADDRESS	213 CHURCHILL DR	2.3 STREET ADDRESS		
CITY-ST-ZIP	LONGWOOD FL	2.4 CITY-ST-ZIP		
TITLE	D	3.1 TITLE		☒ Change ☐ Addition
NAME	FRIEDRICH, THOMAS P	3.2 NAME	Orlete	
STREET ADDRESS	3440 GOLDENROD RD #533	3.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE		☒ Change ☐ Addition
NAME	FRIEDRICH, ROBERT P	4.2 NAME	Orlete	
STREET ADDRESS	213 CHURCHILL DR	4.3 STREET ADDRESS		
CITY-ST-ZIP	LONGWOOD FL	4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: [signature] Johann P. Friedrich 4-17-95 682-4545
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0000160 CP