


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90054 048 ***150.00

DOCUMENT # P02000088713	
1. Entity Name MOTORGING CONCEPT DISTRIBUTION, INCORPORATED	

Principal Place of Business 7213 SANDSCOVE COURT SUITE 9 WINTER PARK, FL 32792	Mailing Address 7213 SANDSCOVE COURT SUITE 9 WINTER PARK, FL 32792
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2. Principal Place of Business 7213 SANDSCOVE COURT Suite, Apt. #, etc. SUITE # 11 City & State WINTER PARK, FL Zip 32792 Country U.S.A.	3. Mailing Address 7213 SANDSCOVE COURT Suite, Apt. #, etc. SUITE # 11 City & State WINTER PARK, FL Zip 32792 Country USA
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03122004 Chg-P CR2E034 (10/03)

4. FEI Number 56-2286539	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CHOW, ANDER 7213 SANDSCOVE COURT SUITE 9 WINTER PARK, FL 32792	7. Name and Address of New Registered Agent Name CHOW, ANDER Street Address (P.O. Box Number is Not Acceptable) 7213 SANDSCOVE COURT SUITE # 11 City WINTER PARK FL Zip Code 32792
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

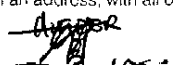
SIGNATURE  DATE **3/15/04**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHOW, ANDER 7213 SANDSCOVE COURT, #9 WINTER PARK, FL 32792 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LAU, DANNY 7213 SANDSCOVE COURT, #9 WINTER PARK, FL 32792 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Chow, Ander** 3-17-04 407-478-0024

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #