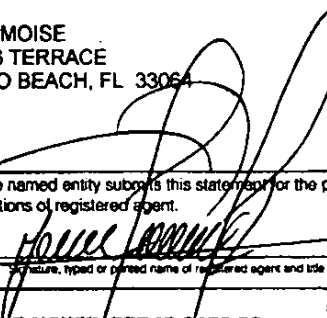
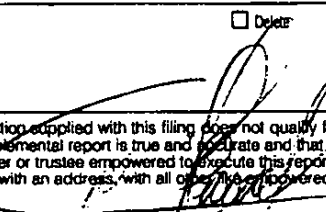


2007 FOR PROFIT CORPORATION ANNUAL REPORT

REJECTED
09-11-2007 90005 025 ***150.00
FILED P06000056272

2007 OCT -8 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000056272					
1. Entity Name FIDELITY MOTORS ENTERPRISE, INC.					
Principal Place of Business 208 SW 2 ST # 3 POMPANO BEACH, FL 33060 US			Mailing Address P.O BOX 152 POMPANO BEACH, FL 33061 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-4967400	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent JOSEPH, MOISE 4551 NE 6 TERRACE POMPANO BEACH, FL 33064				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				Zip Code	
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					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P.D.	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	JOSEPH, MOISE		NAME		
STREET ADDRESS	P.O BOX 152		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH, FL 33061		CITY-ST-ZIP		
TITLE	VP	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	ALFRENARD, LUCNER		NAME		
STREET ADDRESS	208 SW 2 ST # 3		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH, FL 33060		CITY-ST-ZIP		
TITLE	M	☒ Delete	TITLE	☐ Change	☐ Addition
NAME	DORIVAL, KERVENS		NAME		
STREET ADDRESS	5890 NW 14 CT		STREET ADDRESS		
CITY-ST-ZIP	SUNRISE, FL 33313		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	FERDINAND, GETEAU		NAME		
STREET ADDRESS	381 NE 27TH STREET		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH, FL 33064		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 information.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					