SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

APPROVED AND FILED

98 NOV -4 AM 9:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~PROFIT~~ CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # J27862

AMENDED

1. Corporation Name

AUTOMOBILI LAMBORGHINI USA, INC.

Principal Place of Business	Mailing Address
7601 CENTURION PARKWAY SO. JACKSONVILLE, FL 32256	c/o WINTHROP, STIMSON, PUTNAM & ROBERTS ONE BATTERY PARK PLAZA NEW YORK, NEW YORK 10004 ATTN: HAROLD S. NATHAN, ESQ.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/17/1990
4. FEI Number: 31-1291436 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, 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: VC NAME: VITTORIO DI CAPUA STREET ADDRESS: 7601 CENTURION PARKWAY SO. CITY-ST-ZIP: JACKSONVILLE, FL 32256	☒ DELETE	1.1 TITLE: P/D 1.2 NAME: Mr. Andrea Villa 1.3 STREET ADDRESS: Via Modena, 12. 1.4 CITY-ST-ZIP: 40019 Sant'Agata, Bolognese (BO) Italy	☐ Change ☒ Addition
TITLE: VC NAME: STREET ADDRESS: 7601 CENTURION PARKWAY SO. CITY-ST-ZIP: JACKSONVILLE, FL 32256	☒ DELETE	2.1 TITLE: S 2.2 NAME: Harold S. Nathan, Esq. 2.3 STREET ADDRESS: 1 Battery Park Plaza 2.4 CITY-ST-ZIP: New York, NY 10004-1490	☒ Change ☐ Addition
TITLE: VC NAME: SUDJASWIN E.L. STREET ADDRESS: 7601 CENTURION PARKWAY SO. CITY-ST-ZIP: JACKSONVILLE, FL 32256	☒ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 300002684573--2 -11/10/98--01054--026 *****61.25 *****61.25	☐ Change ☐ Addition
TITLE: VCD NAME: STREET ADDRESS: 7601 CENTURION PARKWAY SO. CITY-ST-ZIP: JACKSONVILLE, FL 32256	☒ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: P NAME: HAMDUN HUTASUHUT STREET ADDRESS: 7601 CENTURION PARKWAY SO. CITY-ST-ZIP: JACKSONVILLE, FL 32256	☒ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

NB 11-6-98

CR2E034 (5/98)

14. 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 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: Harold S. Nathan — October 27, 1998 — 212-858-1246

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