

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

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PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
		FILED 97 JUL 31 PM 2: 16 SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P93000020807 (2)
 1. Corporation Name
IRA LEVIN MOTORS, INC.

Principal Place of Business 3112 65 WAY N ST PETERSBURG FL 33710	Mailing Address 3112 65 WAY NORTH ST. PETERSBURG FL 33710
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/16/1993	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0396066	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

**LEVIN, GERALD
3112 65TH WAY NORTH
ST. PETE. FL 33701**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
83.	
84. City	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	LEVIN, IRA A	
STREET ADDRESS	5824 DOWNFIELD WOOD DRIVE	
CITY-ST-ZIP	CHARLOTTE NC	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	LEVIN, BARBARA	
STREET ADDRESS	3112 65TH WAY, N	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	HOBBS, LEVIN S	
STREET ADDRESS	5824 DOWNFIELD WOOD DRIVE	
CITY-ST-ZIP	CHARLOTTE NC	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 ****165.00 ****165.00

14. I do 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 _____

CP2E034 (4/97)

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July 28, 1997

Division of Corporations
Annual Reports Section
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

As per my conversation with one of your employees, I am sending this note to you.

Last week I received my corporate renewal form, which showed a penalty for being late. After checking with my accountant, we find we never received the one sent in January as told to me by your office. We always keep a record of all corporate papers received and show we never received the first one which was sent to us.

Enclosed is our check for \$165 as we feel we are not at fault. If this is not acceptable, as we never have been late since our corporation was established in 1993, please call 813-544-6614 and ask for Gerald Levin.

Thank you.

Barbara Levin

Barbara Levin, Vice President
Ira Levin Motors
3112 65 Way North
St. Petersburg, FL 33710