

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90134 002 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P93000056695

1. Corporation Name
FUTURE MOTOR CARS, INC.



Principal Place of Business 6555 - 44TH STREET, N. SUITE 2003, ENTERPRISE BUSINESS PARK PINELLAS PARK FL 34665	Mailing Address 6555 - 44TH STREET, N. SUITE 2003, ENTERPRISE BUSINESS PARK PINELLAS PARK FL 34665
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/12/1993
4. FEI Number 59-3193528
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 the current year Intangible Personal Property Tax. <input checked="" 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	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent
KAMAN, THOMAS J
% VIKWEST, INC. ENTERPRISE BUSINESS PARK
6555 - 44TH STREET N., SUITE 2003
PINELLAS PARK FL 34665

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	KAMAN, THOMAS J	
STREET ADDRESS	% 6555 - 44TH STREET N., SUITE 2003	
CITY-ST-ZIP	PINELLAS PARK FL	
TITLE	DST	<input type="checkbox"/> DELETE
NAME	JOHNSON, THOMAS	
STREET ADDRESS	482 CRESTVIEW DRIVE	
CITY-ST-ZIP	LONGWOOD FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	JENSEN, HAROLD	
STREET ADDRESS	1369 S. RIDGE LAKE CR.	
CITY-ST-ZIP	LONGWOOD FL	
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	DST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Samuels, Scott
2.3 STREET ADDRESS	1216 79th Street
2.4 CITY-ST-ZIP	St. Petersburg, FL 33707
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	

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, with all other like empowered.

SIGNATURE: Thomas Kaman **SIGNATURE REQUIRED** Date: 2/19/99 Daytime Phone #: 727-322-7730

CR2E034 (11/98)