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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000088640 (6)

CLAY MOTOR NEWCO, INC.

Principal Place of Business	Mailing Address			
700-900 EAST SUNRISE BLVD. FORT LAUDERDALE FL 33304	700-900 EAST SUNRISE BLVD. FORT LAUDERDALE FL 33304			
2. Principal Place of Business	2a. Mailing Address			
Suite Apt W. etc.	26 Suite, Apt. #, etc.			

FILED May 13 1998 8:00am Secretary of State



		700-900 EAST SUNRISE FORT LAUDERDALE FL S			DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualified 12/29/1993			
2. Principal Place of Business 2a. Mailing Address				4. FEI Number		pplied For		
26 Suite, Apt #, etc. Suite, Apt #, etc.					65-0457562		ot Applicable	
22 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip Country			8. This corporation owes or has paid the current year Intangible			
24	25 25 Address of Current	29 30 Secietary Agent			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
9, Name and Address of Current Registered Agent KING W. CLAV 81 N					10. Name and Address of New Neglistered	wholir		
KING, W. CLAY								
700-900 EAST SUNRISE BLVD. FORT LAUDERDALE FL 33304			82		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 607.0506, Florida Statutes.								
SIGNATURE Signature typed or printed name of registured agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND		13.	or a digitatore	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12	
TITLE	VO	DELETE	1.1 TITLE			Change	Addition	
NAME	KING, LOUIS		1.2 NAME	ĺ				
STREET ADDRESS	700-900 EAST SUNRISE BLVD.		1.3 STREE	T ADDRESS			l	
CITY-ST-ZIP	FORT LAUDERDALE FL 33304		1.4 CITY-	ST-ZIP			j	
TITLE	PD	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition	
NAME	KING, W. CLAY		2.2 NAME				į	
STREET ADDRESS	700-900 EAST SUNRISE BLVD.		2.3 STREE	T ADDRESS			ļ	
CITY-ST-ZIP	FORT LAUDERDALE FL 33304	T AFLERE	2 4 CITY	ST-ZIP		l lác	4444	
TITLE	VD	☐ DELETE	3.1 TITLE			☐ Change	Addition	
NAME	APPLEBY, ED 700-900 EAST SUNRISE BLVD.		3.2 NAME					
STREET ADDRESS	FORT LAUDERDALE FL 33304			TADDRESS				
CITY-ST-ZIP TITLE	VT VT	DELETE	3.4. CITY-	ST-ZIP		Change	Addition	
NAME	FRANCIS, KIRK J	C. OLCCIE	4.1 ITE			- Simile		
STREET ADDRESS	700-900 EAST SUNRISE BLVD.			T ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL 33304		4.4 CITY -				Ì	
TITLE	VS	DELETE	51 TITLE	31-21/		Change	Addition	
NAME	GONZALEZ III. FRANK C		5.2 NAME				_	
STREET ADDRESS	700-900 E SUNRISE BLVD			T ADDRESS			Ì	
CITY-ST-ZIP	FT LAUDERDALE FL		5.4 CITY-	i				
TITLE	V	DELETE	6.1 TITLE		24	Change	Addition	
NAME	GALE, JEFFREY M		6.2 NAME		GALE, STEFFREY M. 700-900 E. SUNAISE BLUD.	-		
STREET ADDRESS	700-900 E SUNRISE BLVD		6.3 STREE	T ADDRESS	700-900 E. SWAISE BLUD.]	
CITY-ST-ZIP	FT LAUDERALE FL		6.4 CITY-		FT. LOW ENGALE, FL 3)364		j	
44 I barabura	artifu that the information number with	this filing door not aught to			ed in Contine 110.07/3Vi) Florida Ctatutos I further a	ortifu that the	information	

remetal certify that the information supplied with this filling doos not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes, i furnier certify that the information indicated on this ennual 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 officer.

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