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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P9400001337 (2)

B & P MOTOR HEADS INC.

Principal Place of Business

Mailing Address



| 1815 OPA LOCKA BLVD OPA LOCKA FL 33054 | | | 1815 OPA LOCKA BLVD OPA LOCKA FL 33054 | | | | |
|--|--|--|--|---|---|--|---|
| | | | | | Date Incorporated or Qualif 12/28/1993 | a. Date of L 01/2 | ast Report 25/1995 |
| 2. Principal Plac | ce of Business | 2a. Mailing Address | | | 4. FEI Number | | Applied For |
| 21 | | 26 | | | 65-0460875 | | Not Applicable |
| Suite, Apt. #, | , etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | 8.75 Additional Fee Required |
| City & State | | City & State | | | 6. Election Campaign Financir Trust Fund Contribution | | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Countr | У | 8. This corporation has liability | for intangible tax un | der s 199.032, |
| 24 | 25 | 29 | 30 | | | Yes No | |
| | g. Name and Address of Curre | nt Registered Agent | | | 10. Name and Address of N | ew Registered Age | <u>nt</u> |
| | | | 8 | 1 Name | | | |
| FINALES, PEDRO 1815 OPA LOCKA BLVD OPA LOCKA FL 33054 | | | B: | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | 8; | 3 | | | |
| | | | 8 | 4 City | | FL ⁸ | 5 Zip Code |
| or registere familiar with SIGNATURE | o the provisions of Sections 607.050 of agent, or both, in the State of Flor n, and accept the obligations of, Sec | ida. Such change was authorition 607.0505, Florida Statu | orized by the cor | poration s boa | ard of preciors, thereby accept the | appointment as regi | stered agent. I am |
| | Signature, typed or printed name of registered ager OFFICERS AN | ND DIRECTORS | 13. | First Biglian are respons | ADDITIONS/CHANGES TO | | ECTORS IN 12 |
| 12. TITLE | 0 | DELETE | 1. 1 TITLE | F | | □ C | |
| NAME | FINALES, PEDRO | - | 1.2 NAMI | E | | | |
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| 1 | OPA LOCKA FL 33054 | | 14 City | | | The state of the s | |
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14. I do hereby certify that the information supplied with this fring is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 early 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 Biock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Con - - I diving Priorie