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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400002026 (0)

SCORPION PERFORMANCE PRODUCTS CO., INC.

FILED May 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						ı tenifel tin ilin elni selil nili elli elli belit i	#11 3 11011 00110 11	918 Att: 1831
2983 RAVENSWOOD RD. 2983 RAVENSWOOD RD.								
FORT LAUDERDALE FL 33312		FORT LAUDE	FORT LAUDERDALE FL 33312			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	0017102	·
						01/07/1994		
2. Principal Pla	ace of Business	2a. Mailing Ac	idress			4, FEI Number	I A	pplied For
21		26	26			65-0469634	N	ot Applicable
Suite, Apt. #	f, etc.	Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22		27				g. Continuate of Citatos Desired	Fee R	equired
City & State		City & Stat	е			6. Election Campaign Financing		May Be
Zip	Country	28		Country		Trust Fund Contribution		to Fees
	25	Ζiρ 29	30	, .	у	This corporation owes or has paid the epersonal Property Tax due June 30.		tangible 7 No
24	g, Name and Address of Curre					10. Name and Address of New Registers		2) 140
TUE	TS, STEVE	<u> </u>		81	Name			
	1 S.E. 4TH AVE.			-	Ot-2-1 A-	100 Day 100		
	LAUDERDALE FL 33316			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)		
, ,,				83				
					-		1221 3	
				84	City	F	L. 85 Zip	Code
	Signature: Typed or printed name of registered at		(NOTE: Re	 -	ent signature rec	quired when reinstating) DATE		
12.	PVS OFFICERS AT	VD DIRECTORS	DELETE.	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	CODOMO, LEONARD	H	DELETE	1.1 TITLE	Ì		Change	☐ Addition
NAME STREET IBBDDGG	17111 N.E. 14 AVE., APT. #	1		1.2 NAME	1.10000000			1
STREET ADDRESS CITY-ST-ZIP	NORTH MIAMI BEACH FL 33				1 ADDRESS			1
TITLE			DELETE	1.4 CHY-5	51-211		Change	Addition
NAME				22 NAME				
STREET ADDRESS					T ADDRESS			1000
CITY-ST-ZIP				2. 4 CITY-	ł			
TITLE			DELETE	3.1 TITLE			Change	Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 \$1REE1	T ADDRESS			
CITY-ST-ZIP		····		3.4. CITY-	ST-ZIP			
TITLE			DELETE	4.1 TITLE	1		☐ Change	Addition
NAME			J	4 2 NAME	J			J
STREET ADDRESS					1 ADDRESS			
CITY-ST-ZIP			DELETE	4.4 CITY-S	ST-ZIP		Phones	Addition
TITLE			DELETE	5 1 THILE			Change	Addition
NAME				5.2 NAME	1 PDD0000			Į
STREET ADORESS			ľ		I ADDRESS			1
CITY-ST-ZIP TITLE			DELETE	5.4 CITY - S 6.1 TITLE	51 - ZIP		Change	Addition
NAME				6.2 NAME			omango	
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP				6.3 STREET				
	ertify that the information supplied	with this filing does n	ot qualify for th			in Section 119.07(3)(i), Florida Statutes. I further	certify that the	information

Increby certify that the information in the receiver or trustee empowered to execute 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.

CANATURE: