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

PROFIT CORPORATION **ANNUAL REPORT**

1998

CITY-ST-ZIP



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000070996 (1)

HORVATH ELECTRIC MOTORS, INC.

Principal Place of Business Mailing Address 3455 WESTVIEW DR. 3455 WESTVIEW DR. NAPLES FL 34104 NAPLES FL 34104 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/26/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0520074 Not Applicable Suite, Apt #, etc Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Źφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HORVATH, DEBORAH 3455 WESTVIEW DR. Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 34104 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE THILE 1.1 TiTLE Change Addition NAME HORVATH, JOSEPH 1.2 NAME 3455 WESTVIEW DR. STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 34104 CITY-ST-ZIP 1.4 CITY - ST - 2IP DELETE TITLE 21 TITLE Addition HORVATH, DEBORAH NAME 2 2 NAME 3455 WESTVIEW DR. STREET ADDRESS 2 3 STREET ADDRESS NAPLES FL 34104 CITY - ST - ZIP 2 4 CITY - ST-ZIP DELETE TITLE 31 TITLE Change ☐ Addition NAME 32 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change TITLE 41 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 51 TITLE Change Addition NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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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 emported 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 a fachment with an address.

FILED

Apr 30 1998 8:00am

Secretary of State