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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000071015 (9)

## BONANZA MOTORS INC.

Principal Place of Business

1327 W 18TH ORLANDO FL			1327 W 18TH ST ORLANDO FL 32805-4407			Date Incorporated or Qualified	3a. Date of La	nt Poport	
2. Principal Place of Business 2a. Mailing Address					09/23/1994 4. FEI Number		01/23/1996 Applied For		
21		26					<u> </u>	Not Applicable	
Suite Apt	# etc		Suite, Apt. #, etc.			59-3270829	607	5 Additional	
22	.,	27	1			5. Certificate of Status Desired	1 1 7	Pequired	
City & Sta	te	City & Sta	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23		28							
Zφ	Country	Zip	L	Country		8. This corporation has liability for i	ntangible tax unde	er s. 199.032,	
24	25	29	30	]			Yes 🗌 No		
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
<ul> <li>office or</li> </ul>	registereo agent, or both, in the St am familiar with, and accept the ob	ate of Florida. Such cl ligations of, Section 6	ange was auth 07.0505, Florid	iorized by a Statutes	the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changir the appointment	Zip Code ng its registered t as registered	
12.	Signature, typicd or problement of registered agent and their dispelled the (NOTE  OFFICERS AND DIRECTORS			Hegistered Agent signature required when reinstating)  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				TODO IN 12	
1 ILE	P		DELETE	11 TITLE		ADDITIONS/OFFICE TO OFFICE	Chan		
NAME	MERA, ARCENIO	<b>L</b>		1.2 NAME			01011	7,00/(011	
STREET ADDRESS	The same of the same of the same			1.3 STREET ADDRESS					
CHY-ST-7P	ORLANDO FL			1.4 CITY - ST - ZIP					
101LE	UNDANDO FL		DELETE	21 TILE	1 - ZIP	Management of the second of th	☐ Chan	ae Addition	
NAME		l,,	DEELIE	22 NAME			டுகொ	An Throntou	
STREET ADDRESS					ADDDCCC				
				23 STREET					
CITY-ST-7 P			-	2 4 CITY - 5	iT-ZiP				

3.1 TITLE

32 NAME 3 3 STREET ADDRESS

41 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

34. CITY+ST-ZIP

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

CI1Y - S1 - Z(P 6.4 CITY-ST-ZIP 14. I do noreby 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 a instancement with an address.

SIGNATURE:

THILE

NAME

111 i.E.

NAME

10.1

NAME

TITLE

NAME

STHEET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET AUDRESS

CHY ST-ZIP

CHY-S1-7#

DELETE

DELETE

DELETE

DELETE

**FILED** 

Feb 26 1997 8:00am

Secretary of State

Change

☐ Change

Change

Change

Addition

Addition

Addition

Addition