## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

SIGNATURE:

1. Corporation Name P95000007094 (2	DOCUMENT # 1. Corporation Name	P95000007094	(2)
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Principal Plac	RICAN AUTOMOTIVE ENGI	NEERING, INC.  Mailing Address				
14260 SW Miami Fl 3	139 COURT 33196	14260 SW 139 COU MIAMI FL 33186	RT			
				3. Date Incorporated or Qualified	3a. Date of Last	t Report
A D: : 15				01/23/1995	Initi	al
2. Principal P	Place of Business	<b>2a.</b> Mailing Address		4. FEI Number		Applied For
Suite, Apt.	#. etc	Suite, Apt. #, etc.		65-0574072		Not Applicable
22	, 512.	27		5. Certificate of Status Desired		75 Additional
City & Stat	e	City & State		6. Election Campaign Financing		e Required
23		28		Trust Fund Contribution		.00 May Be ded to Fees
Zip ──	Country	Zip	Country	8. This corporation has liability for		
:4	25	29	30		i □No	,
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New R	legistered Agent	
			81 Name			
LEE, D			82 Street A	Address (P.O. Box Number is Not Acceptab	ole)	
	SW 139 COURT		83			
MIMMI	FL 33186		65			
			84 City		<b>85</b>	Zip Code
11. Pursuant to or register familiar wi	to the provisions of Sections 607.050 red agent, or both, in the State of Fio ith, and accept the obligations of, Sec	12 and 607.1508, Florida Statu rida. Such change was authorition 607.0505. Florida Statuto	tes, the above-named con red by the corporation's t	rporation submits this statement for the pur poard of directors. I hereby accept the appo	rpose of changing its ointment as registers	s registered office ed agent. I am
	ian, and becept the obligations of, set	JUON OUT JUSUS. FIONDA STAINTE				
			5,			
	Signature typed or printed name of registered age			guired when reinstatinol	DATE	
SIGNATURE _			DTE: Registered Agent signature real		DATE	TORS IN 12
SIGNATURF _	OFFICERS AF	nt and little if applicable. (N	DTE: Registered Agent signature rec	quired when reinstating)  ADDITIONS/CHANGES TO OFFI		
SIGNATURE _ 12. HLE IAME	OFFICERS AT  D  LEE, DAVID	nt and little if applicable. (NO	TE Registered Agent signature rei		ICERS AND DIRECT	
SIGNATURE _  12.  HILE  NAME  STREET ADDRESS	OFFICERS AT D LEE, DAVID 14260 SW 139 COURT	nt and little if applicable. (NO	13. 1 1 TITLE		ICERS AND DIRECT	
SIGNATURE _  12.  HILE  NAME  STREET ADDRESS  DITY-ST-ZIP	OFFICERS AT  D  LEE, DAVID	nt and title if applicable. (N ND DIRECTORS DELETE	13. 1 1 TITLE 12 NAME 1 3 STREET ADDRESS 1.4 CITY - ST-ZIP		ICERS AND DIRECT	
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SIGNATURE	OFFICERS AT D LEE, DAVID 14260 SW 139 COURT	nt and title it applicable. (NAND DIRECTORS DELETE	13. 1 1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP		ICERS AND DIRECT Change	e Addition
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NG OFFICER OR DIBECTOR