## 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

P95000009295 (3) DOCUMENT # ASIAN AUTOMOTIVE, INC. Principal Place of Business Mailing Address 1312 GREENDALE AVE. 1312 GREENDALE AVE. FORT WALTON BEACH FL 32547 FORT WALTON BEACH FL 32547 3. Date Incorporated or Qualified 3a. Date of Last Report 02/03/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 59-3292795 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 Trust Fund Contribution 28 Added to Fees Ζıp Country 8. This corporation has liability for intangible tax under s. 199,032. Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GREEN, MONROE Y 82 Street Address (P.O. Box Number is Not Acceptable) 1312 GREENDALE AVE. 83 FORT WALTON BEACH FL 32547 City 85 Zip Code 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. altire, typed or ported name of registered agent and blic if a splicable (NOTE: Frequetered Agent signature required when reinstating) DATE (12/95)12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE Addition 1.1111.6 Change NAME GREEN, MONROE Y 1.2 NAME **CR2E034** STREET ADDRESS 136-B OAK DR. 1.3 STREET ADDRESS EGLIN AIR FORCE BASE FL 32542 CITY-ST-ZIP 1.4 CHY-S1-ZIP DELFTE TITLE Change Addition 2 1 DILE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS City-St-ZiP 24 CHY-SI-ZIP TITLE DELETE 3 1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3.4 CITY-S1-7IP [ ] DELFTE TITLE 4 3 TITLE [ ] Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-S1-7IP DELETE TITLE 5 1 111LF ['] Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5 4 CITY - S1 - 7IP DELETE TITLE 6 1 TITLE Change Addition NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP

for supplied with this 1/g is voluntarily furnished and does not qualify for the examption stated in Section 119.07(3)(k), Florida Statutes. I further do not this annual type for supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under for the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I do hereby certify that the inform certify that the information indice oath: that I am an officer or appears in Block

64 CITY-ST-ZIP

SIGNATURE