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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State IVISION OF CORPORATIONS

FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90083 032 ***150.00

1999	See With the	DI	
DOCUMENT 1. Composition Name	# P950000356	36	

1. Corporation Name DESTINA MOTOR COMPANY INC

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Principal Plac	e of Business	Mailing Address						ł Baiżi Baian i		.114 1151 1101	
2919 CORAL SHORES DRIVE 4191 N. STATE RD 7 -T. LAUDERDALE FL 33306 LAUDERDALE LAKES FL 33319			-	DO NOT WRI	. ~ TE IN THIS	SPACE					
						3. Date inc	corporated or Qualifed	-			1
						05/08/	1 '				
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Nur			Ap	plied For	1
3297	W. OAKLAND PK B	12 26				65-058	6048		No	t Applicable]
Suite, Apt.		Suite, Apt. #, etc.					te of Status Desired		\$8.75	Additional]
22		27				J. Ceruica	Status Desired		Fee Re	quired	1
City & Stat	/	City & State				1	Campaign Financing	П٠	\$5.00		
	ERBALL LAKES	28					and Contribution		Added t	lo Fees	┨
¬ ^{Zip} マネっ	Country D	Zip	Cour	ntry		ı	poration owes the curr	ent year Int	angible ∐Yes ⊿	Xw₀	
24 333		29	30			 	Property Tax.	enistered		PLN10	1
	9. Name and Address of Curre	nt Registered Agent		81	Name	IV. Rame a	LITO AUGIESS OF HEW T	(agistorea	- goin		t
GOLE	DING, SHELDON						1				-
	N.W. 3RD AVENUE E			82	Street Addre	ess (P.O. Box	Number is Not Accepta	able)			
	E 300			83			-		A		1
	AUDERDALE FL 33301							·			-
				84	City			FL	85 Zip (Code	
office or r	to the provisions of Sections 607.05 registered agent, or both, in the State of familiar with, and accept the obligations of the state of the section of the	e of Florida. Such change was a ations of, Section 607.0505, Florida	authonzeo orida Statu	by in ites.	e corporauc	d when reinstating)	rectors. Thereby acce	DATE			6
12.		ND DIRECTORS	13.			ADDITIO	NS/CHANGES TO OF	FICERS AN			اِ چ
TITLE	PD	☐ DELETE	1.1 ТП	LΕ					Change	☐ Addition	5
NAME	JACKSON, ERIC		1.2 NA	ME							8
STREET ADDRESS	2919 CORAL SHORES DR.		1.3 STI	REETAL	DORESS						1 1
CITY-ST-ZIP_	FT. LAUDERDALE FL 33306	□ astere		Y-ST-Z	UP	<u> </u>			Change	☐ Addition	<u> </u>
TITLE	STD	☐ DELETE	2.1 TIT						Onlange	□ Addiaon	•
NAME	JACKSON, COLIN		2.2 NA								
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NAME			6.2 NA		DDRESS						
STREET ADDRESS				Y-\$T-Z							
CITY ST ZID	[0.4 (-1)	,-Q1-Z			4				1

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 supplement 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 601, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or of an article 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 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 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 supplied with the information indicated on 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 601, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 601, Florida Statutes in Florida Statutes.

SIGNATURE: Y

NATURE REQUIRED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Daytime Phone #