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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000044479 (0)

FEROCIOUS MOTORCYCLE PARTS/SALVAGE, INC.

Mailing Address

FILED Apr 03 1998 8:00am Secretary of State



3001 4TH TERRACE N.W. #175 POMPANO BEACH FL 33064			3001 4TH TERRACE N.W. #175 POMPANO BEACH FL 33064				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/01/1995				
2. Principal I	g Address				4. FEI Number		A	applied For			
21	•	26					65-0654441			lot Applicable	
Suite, Apt	#, etc.	Suite,	Apt. #, etc.				5. Certificate of Status Desired			Additional Required	
City & Sta	te	City & 28	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	Country 25 29		Zip Cou 30		ountry		This corporation owes or has paid the current year Intarchible Personal Property Tax due June 30. Yes No				
	g, Name and Address of Cur	rent Registered A	gent		_		10. Name and Address of New R	egistered A	gent		
TUSSLER, KYLE W 3001 4TH TERRACE N.W. #175 POMPANO BEACH FL 33064					\perp	Name Street Addre	Address (P.O. Box Number is Not Acceptable)				
				84	4	City		FL	85 Zip	Code	
SIGNATURE	T	agent and title it applicat AND DIRECTORS		13.	<u>-</u>	t signature require	d when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND			
TITLE	l D		DELETE	1.1 TOLE		ĺ			Change	Addition	
NAME	TUSSLER, KYLE W			1.2 NAME							
STREET ADDRESS	3001 4TH TERRACE N.W			1.3 STREE		!					
CITY-ST-ZIP	POMPANO BEACH FL 33	1064	DELETE	1.4 CITY -		ZIP			Change	Addition	
TITLE NAME			LL DELCIL	2.1 TITLE 2.2 NAME		ł			— Avianitie	MUUIJIUJI	
STREET ADDRESS				2.2 NAME		DUBECC					
CITY-ST-ZIP	!			2. 4 CITY							
TITLE			DELETE	3.1 TITLE					Change	Addition	
NAME				3.2 NAME					·	_	
STREET ADDRESS				3.3 STREE	ET AI	DDRESS					
CITY-ST-ZIP				3.4. CITY-	- \$1	- ZIP					
TITLE			DELETE	4.1 TITLE					Change	Addition	
NAME				4. 2 NAMI	E						
STREET ADDRESS				4.3 STREE	ET AC	DDRESS					
CITY-ST-ZIP				4.4 CiTY -	ST-	ZIP					
TITLE			DELETE	5.1 TITLE					Change	Addition	
NAME				5.2 NAME	:						
STREET ADDRESS				5.3 STREE	et a i	odress					
CITY-ST-ZIP				54 City-	SI-	ZIP					

14. Thereby 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 eath, 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 an attachment with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

TITLE

NAME

STREET ADDRESS

Change

Addition