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



| | RPORATION UAL REPORT 1996 | Sandra i Secreta | RTMENT OF STATE B. Mortham ary of State CORPORATIONS | | |
|---|---|---|--|--|--|
| DOCU 1. Corporation | MENT # P950 | 000044761 (1) |) | | |
| POWE | ERMOTIVE ENGINEERING | 3 INC. | | i sebilbat din sedil birli batis nass | t Anes), Charle de la la Sellet banen Diene ben eine |
| Dringing Diag | - 40 | | | | |
| Principal Place of Business Mailing Address | | | | a negriggs his ibini dirin apur Adnii | i najili balik dibili digili 1801A bilat 1907 1901 |
| 1755 N.E. 174TH STREET N MIAMI BEACH FL 33162 N MIAMI BEACH FL 33162 N MIAMI BEACH FL 33162 | | | | | |
| | | | 199 | Date Incorporated or Qualified 06/09/1995 | 36. Date of Last Report |
| 2. Principal P | lace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 65-058675 | |
| 22 Cdu & Stot | _ | 27 | | 5. Certificate of Status Desired | See Required |
| City & State 23 Zip | | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| 24 ZIP | Country 25 | Zip [29] | Country 30 | 8. This corporation has liability for in Florida Statutes Yes | ntangible tax under s 199.032, |
| | 9. Name and Address of Cu | rrent Registered Agent | | Florida Statutes Yes 10. Name and Address of New Re | |
| 11. Pursuant to register familiar with SIGNATURE | Il BEAH FL 33162 to the provisions of Sections 607.0 ed agent, or both, in the State of Fith, and accept the obligations of, S Styreture, speed or printed name of registered a | Section 607.0505, Florida Statutes. | and the permitted book | ration submits this statement for the purp rd of directors. I hereby accept the appoi | PL 85 Zip Code Dose of changing its registered office intranent as registered agent. I am |
| 12. | | agont and the flapplicable. (NOTE: AND DIRECTORS | Registered Agent signature required | | DATE CEDE AND DIDECTORS III |
| TITLE | PD | DELETE | 1. 1 TITLE | ADDITIONS/CHANGES TO OFFIC | CERS AND DIRECTORS IN 12 Change |
| NAME STREET ADDRESS | HERNANDEZ, LENIN | | 1.2 NAME | | The country |
| STREET ADDRESS CITY-ST-ZIP | 1755 N.E. 174TH STREET N MIAMI BEACH FL 33162 | | 1.3 STREET ADDRESS | | |
| TITLE | PD PD | Z DELETE | 1.4 C(TY - ST - ZIP 2. 1 T(TLE | | |
| NAME | HERNANDEZ, HECTOR | ***** | 2 2 NAME | | ☐ Change ☐ Addition |
| STREET ADDRESS | 1755 N.E. 174TH STREET | | 2 3 STREET ADDRESS | | |
| CITY-ST-ZIP | N MIAMI BEACH FL 33162 | | 2.4 CITY - ST - ZIP | <u></u> | |
| TITLE NAME | | ☐ DELETE | 3. 1 TITLE | | ☐ Change ☐ Addition |
| STREET ADDRESS | | | 3.2 NAME | | |
| CITY-ST-ZIP | | | 3.3 STREET ADDRESS | | |
| TITLE | | DELETE | 3.4 CITY-ST-ZIP 4. 1 TITLE | | Choses D MARCO |
| NAME | | | 4.2 NAME | | ☐ Change ☐ Addition |
| STREET ADDRESS | | | 43 STREET ADDRESS | | |
| CITY-S1-ZIP | | | 4.4 CiTY - ST - ZiP | | |
| TITLE | | ☐ DELETE | 5. 1 TITLE | | Change Addition |
| NAME STREET ADDRESS | | | 5.2 NAME | | |
| CITY - S1 - 2IP | | | 5 3 STREET ADDRESS | | ł |
| TITLE | | ☐ DELETE | 5.4 CITY-ST-ZIP 6.1 TITLE | | |
| NAME | | | 6.2 NAME | | Change C Addition |

6.4 CITY-ST-ZIP 14. I do hereby certify that the information of piled with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated of 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 appears in Block 12 or Block 13 or Block 14 or Block 15 or

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY - S1 - ZIP

LEWIN HERNANDEZ.

4-25-96 (305) 940-4918

CR2E034 (12/95)