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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000049228 (6)

MOTO MOTORS, INC.

Principal Place of Business

4466 S. ORANGE BLOSSOM TRAIL

Mailing Address

FILED Jan 16 1998 8:00am Secretary of State



4466 S. ORANGE BLOSSOM TRAIL 4466 S. ORANGE BLOSSOM TRAIL KISSIMMEE FL 34746 KISSIMMEE FL 34746 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/23/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3321090 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MACKENS, ROLF 619 MOSS PARK COURT Street Address (P.O. Box Number is Not Acceptable) KISSIMMEE FL 34743 83 Zin 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. n's board of directors. Thereby accept the appointment as registered SIGNATURE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13, DELETE 1.4 FILE Addition TITLE vice pres. MACKENS, ROLF 1.2 NAME NAME HERNANDEZ, SANGRA 619 MOSS PARK COURT 1.3 STREET ADDRESS STREET ADDRESS Park ct KISSIMMEE FL 34743 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change TITLE PATA, PATRICK R NAME 2.2 NAME 777 S. FEDERAL HWY., #106 2.3 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETÉ P8- M 3.1 TITLE Change Addition TITLE SPELLMAN, ROBERT J NAME 3.2 NAME 637 MOSS PARK CT STREET ADDRESS 3.3 STREET ADDRESS KISSIMMEE FL 34743 CITY-ST-ZIP 3.4, CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4,3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Addition DELETE 5.1 TITLE TIT) F 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ___ Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 supplemental 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

REQUIRED

1-5-97 131-1111