

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000079180 (2)**

1. Corporation Name

AUTOTECH MOTORSPORTS INTERNATIONAL, CORP.



Principal Place of Business

**89 S.E. 2ND STREET
MIAMI FL 33131**

Mailing Address

**89 S.E. 2ND STREET
MIAMI FL 33131**

3. Date Incorporated or Qualified
10/16/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VERZARO RODRIGUES, JOAO F
3004 N.E. 5TH TERRACE
FORT LAUDERDALE FL 33334**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
8090 N.W. 10TH STREET

83

84 City
PLANTATION

FL

85

Zip Code
33322

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.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent Signature Required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
VERZARO RODRIGUES, JOAO F
3004 N.E. 5TH TERRACE C-303
FORT LAUDERDALE FL 33334**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
PLACUCCI, CARLOS E
3630 N.W. 85TH WAY #307
SUNRISE FL 33351**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
DE PAULA, HELY K
113 S.E. 1ST AVENUE
MIAMI FL 33131**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
**8090 N.W. 10TH STREET
PLANTATION FLORIDA, 33322**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied 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 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 recorder 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joao F. Varzaro Rodriguez 4-16-96 373-4455

CR2E034 (12/95)