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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P95000080347 (4)

ELECTRIC MOTORS, INC.

Principal Place of Business Mailing Address
1778D \$ ORANGE BLOSSOM TRAIL 1779D \$ ORANGE

FILED Mar 13 1998 8:00am Secretary of State



1779D 8 ORANGE BLOSSOM TRAIL APOPKA FL 32703		1779D S ORANGE BLOSSOM TRAIL APOPKA FL 32703				
		HISTORY IN MANAGE			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 10/12/1995	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-3348827	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4	\$8.75 Additional	
City & State		City & State		5. Certificate of Status Desired	Fee Required	
		├ 1 '	 		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28 Zip	Countr	,		
24]		·	30	,	 This corporation owes or has paid the Personal Property Tax due June 30. 	Yes No
[24]	25 9. Name and Address of Curr	ent Registered Agent	30[10. Name and Address of New Register	
- CU		on negatorea region	61	Name		
	AMIEH, FAROOG	OH TOU		7 (3.110		
1779-D SOUTH ORANGE BLOSSOM TRAIL			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
, API	OPKA FL 32703		83			
			63			
			84	City	-	85 Zip Code
			<u>-</u>			L S Zip 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'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			ent signature req	uired when reinstating) DAT	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE	D	☐ DELETE	1.1 TITLE			Change C Addition
NAME	SHAMEH, FAROOG		1.2 NAME			
STREET ADDRESS	12524 BOHANNON BLVD		1.3 STREE	I ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32824		1.4 C/TY-	ST-ZIP		T Augus
TITLE	D	☐ DELE te	2.1 TITLE			Change Addition
NAME	SHAMIEH, ANITA		2.2 NAME			
STREET ADDRESS	12524 BAHANNON BLVD		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32824		2. 4 CITY-	ST-ZIP	Y	
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	ADDRESS		
CITY-ST-ZIP			4.4 CITY - 3	ST-ZIP		
TITLE		DELETE	5.1 TITLE	-		☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	T ADDRESS		
1	T.		5.4 CITY - 1			
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	DI-TIE		Change Addition
		- 3.cc.				
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE			
CITY-ST-ZIP		'ni. ni.t. 192	6.4 CITY-1		n Section 140 07/21/i) Florida Statutos I further	

I nereby 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 informatio 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 apport 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.

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