
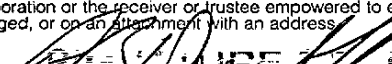


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P95000095175 (2) 1. Corporation Name ANGUS MOTORS INCORPORATED					
Principal Place of Business 2725 W KING ST COCOA FL 32926 US			Mailing Address 1850 E. MERRITT ISLAND CAUSEWAY MERRITT ISLAND FL 32952		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/15/1995	
21 Suite, Apt #, etc.		26 509 East NASA Blvd.		4. FEI Number 59-3350332	
22 City & State		27 Suite, Apt. #, etc.		Applied For Not Applicable	
23 Zip		28 Melbourne, FL		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
24 Country		29 32901		30 US	
9. Name and Address of Current Registered Agent DEARDOFF, R D 1850 E MERRITT ISLAND CSWY MERRITT ISLAND FL 32952			10. Name and Address of New Registered Agent		
			81 Name Deardoff, R. B.		
			82 Street Address (P.O. Box Number is Not Acceptable) 509 East NASA Boulevard		
			83		
			84 City Melbourne		
			85 Zip Code FL 32901		
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 reinstating) DATE					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE P					
1.2 NAME DEARDOFF, BRUCE					
1.3 STREET ADDRESS 1850 E. MERRITT ISLAND CAUSEWAY					
1.4 CITY-ST-ZIP MERRITT ISLAND FL 32952					
2.1 TITLE VP					
2.2 NAME FISHER, MARIE					
2.3 STREET ADDRESS 1850 E MERRITT ISLAND CSWY					
2.4 CITY-ST-ZIP MERRITT ISLAND FL					
3.1 TITLE ST					
3.2 NAME CHENEY, E RENEE					
3.3 STREET ADDRESS 1850 E MERRITT ISLAND CSWY					
3.4 CITY-ST-ZIP MERRITT ISLAND FL					
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 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:  R.B. Deardoff 1-5-98 407- 956-0600					

CR2E034 (10/97)