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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9600005622 (1) 1. Corporation Name

MAN-CAR, INC. Mailing Address Principal Place of Business 508 JASON DRIVE 508 JASON DRIVE LADY LAKE FL 32159 LADY LAKE FL 32159-6402 3. Date Incorporated or Qualified 3a. Date of Last Report 01/17/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 26 P.O. Box 1172 Applied For Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Lady Lake, FL Zιο Country Country 8. This corporation has liability for intangible tax under s. 199.032, 25 29 32158-1172 Florida Statutes Yes No 24 Lake 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Brett L. Swigert, P.A.
Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET 82 TALLAHASSEE FL 32301-2525 531 North Bay Street 83 City Zip Code Eustis 32726 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. **PSTD** DELETE Addition TITLE 1.1 TI31 F CARDOZO, MANUEL JR. NAME 12 NAME **508 JASON DRIVE** STREET ADDRESS 13 STREET ADDRESS LADY LAKE FL 32159 CITY-ST-ZIP 1 4 CITY - ST - ZiP Addition DELETE Change TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY ST-ZIP 2 4 CITY - ST - ZIP Addition TITLE DELETE 3 1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CrTY - ST - ZIP 3.4. CITY - ST - ZIP ■ DELETE Change Addition 4.1.1ITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CHTY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 52 NAME **5 3 STREET ADDRESS** STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP 500002092255***** -02/19/97--01081--003 DELETE Addition 6.1 TITLE THLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS ***165.00

14. I do hereby certify that the information supplied with this filling 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 13 or Block 13 if changed, or on an attachment with an address.

CNATURE OF AMUSE CO.

Day 15 1987

FILED

Feb 19 1997 8:00am

Secretary of State