PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90199 010 ***158.75

DOCUMENT # P96000049224

1. Corporation Name

HERCULES MOTOR CAR COMPANY

Date at a set	O1		D	-:
Principal	riace	O1	Вυ	siness

Mailing Address

2502 N 70TH ST **TAMPA FL 33619** 2502 N 70TH ST

TAMPA FL 33619 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/06/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2502 59-3425210 Not Applicable 26 Suite, Apt. #, etc \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be un Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes the current year Intangible XYes \square No 30 Personal Property Tax. 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent eci Tarbr TAYLOR, CECIL M Street Address (P.O. Box Number is Not Acceptable) 2502 N 70TH ST **TAMPA FL 33619** 83 84

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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. □ DELETE ☐ Change ☐ Addition 1.1 TITLE TITLE TAYLOR, CECIL M 1.2 NAME NAME 10145 CURLEY RD 1.3 STREET ADDRESS STREET ADDRESS SAN ANTONIO FL 33576 1.4 CITY-ST-ZIP CITY-ST-ZIF DELETE 2.1 TITLE Change Addition TITLE MOORE, GREG 2.2 NAME NAME 9816 U.S. HWY 92 2.3 STREET ADDRESS STREET ADDRESS **TAMPA FL 33610** 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITLE □ DFLETE 3.1 TITLE TAYLOR; FERN 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 10145 CURLEY RD SAN ANTONIO FL 33576 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change ☐ Addition 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, with all other like empowered.

SIGNATURE:

SIGNACECTEM TAYLORUIRED

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