## 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 P96000071539 (6)

EXECUTIVE MOTORS, INC. Principal Place of Business Mailing Address 15455-G W DIXIE HWY 15455-G W DIXIE HWY N MIAMI BEACH FL 33162 N MIAMI BEACH FL 33162 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/26/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 65-0696299 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 X Yes 25 29 30 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MREJEN, ARIE PA 701 W CYPRESS CREEK RD Street Address (P.O. Box Number is Not Acceptable) SUITE 302 83 FT LAUDERDALE FL 33309 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 agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD ☐ DELETE 1.1 TITLE Change Addition **AOUATE, DAVID** NAME 1.2 NAME 19501 E COUNTRY CLUB DR., #505 STREET ADDRESS 1.3 STREET ADDRESS **AVENTURA FL** 33<u>180</u> CITY-ST-ZIP 1.4 CITY-ST-ZIP Ø DELETE TITLE 2.1 TITLE Change Addition ADUATE, Michel 21150 Pointe Place #1203 Aventura, FL 33180 NAME **AOVATE, MICHEL** 2.2 NAME STREET ADDRESS 1000 ISLAND BLVD., #1512 2.3 STREET ADDRESS CITY-ST-ZIP N MIAMI BEACH FL 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITEE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change ☐ Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE Change 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 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 one an attachment with an address.

SIGNATURE:

CITY-ST-ZIP

3/2-100

**FILED** 

Mar 24 1998 8:00am

Secretary of State