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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000078865 (8)

BATESVILLE MOTOR CARS, INC.

<b>2.</b> Principa Pla 1						
-n '				3. Date Incorporated or Qualified 09/23/1996	3a. Date of Last Report	
<u>,  </u>	ce of Business	2a. Mailing Address		4. FEI Number	Applied For	
	*** - * * * * * * * * * * * * * * * * *	26	· · · · · · · · · · · · · · · · · · ·		Not Applicable	
Suite Apt #, etc. 22		Suite Apt. #, etc.		5. Certificate of Status Desired Fee Required Fee Required		
City & State		City & State	├¬ ′		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	<b>28</b>	Country			
a]	25	29	30	8. This corporation has liability for in Florida Statutes	Yes No	
<u>'</u>	9. Name and Address of Cui		1901	10. Name and Address of New Reg		
343 A	NLAWYER CHARTERED NLMERIA AVENUE NL GABLES FL 33134		83	Milton G. Fishe Iress (P.O. Box Number is Not Acceptable I Venera Avenue		
			84 City	Coubles	FL 85 Zip Code	
11. Pursuant to office or rea	the provisions of Sections 607.	0502 and 607.1508, Florida Stat	utes the above named con	poration submits this statement for the n	rpose of changing its registered	
agent. I am	familiar with and accept the of	oligations of ecclin 807 0505,	Florida Statutes.  TON G. FISHER	tion's board of directors. I hereby accep	the appointment as registered	
SIGNATUR <b>!</b>	Crest and Superior Strains of the green		OTE: Registered Agent signature requi	(red when reinstating)	01-16-97	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC		
	PSTD	DELETE	1.1 TITLE		Change Addition	
	LABUZAN, G. MARSHALL I	v	1.2 NAME			
	8330 SOUTHWEST 156 ST		1.3 STREET ADDRESS			
	MIAMI FL 33157		1.4 CITY-ST-ZIP			
MLE		DELETE	2 1 TITLE	<del> </del>	☐ Change ☐ Addition	
VAME		<del></del>	2.2 NAME	•		
STREET ADDRESS			2.3 STREET ADDRESS			
DITY - \$1 - 2/P			2 4 CITY-ST-ZIP	8	; ;	
TOLE		DELETE	3.1 TITLE		Change Addition	
VAME			3.2 NAME	•		
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST ZIP			3.4 CITY-ST-ZIP	•		
TITLE		DELETE	41 TITLE		☐ Change ☐ Addition	
VAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - \$1 - ZIP			4.4 CITY - ST - ZIP	•		
rires rezir		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
IAME			5.2 NAME		hand ormings hand required	
STREET ADDRESS			5.3 STREET ADDRESS			
DITY - ST - ZIP!			5.4 CITY-ST-ZIP			
TITLE		DELETE	61 TITLE		☐ Change ☐ Addition	
AME			6.2 NAME			
STREET ADDRESS		•	6.3 STREET ADDRESS			
CHY-SI-ZIP			64 CITY-ST-ZIP			
	certly that the information so	and with this fil no boes not ou		d in Section 119.07(3)(i), Florida Statutes it my signature shall have the same legal ort as required by Chapter 607, Florida S	I further certify that the	