

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

APPROVED
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1998 MAR -9 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000102603 (3)

1. Corporation Name
UNLIMITED MOTOR CARS, INC.



Principal Place of Business

Mailing Address

7840 ATLANTIC BLVD
JACKSONVILLE FL 32211

7840 ATLANTIC BLVD
JACKSONVILLE FL 32211

13636 Atlantic Blvd
Jacksonville FL 32225

1763 Pronghorn Ct
Jacksonville FL 32225

Date Incorporated or Qualified
12/17/1996

3a. Date of Last Report

2. Principal Place of Business

21 13636 Atlantic Blvd
Suite, Apt. #, etc.

2a. Mailing Address

25 1763 Pronghorn Ct
Suite, Apt. #, etc.

4. FEI Number

59-3421548

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

22 City & State

23 Jacksonville

27 City & State

28 Jacksonville FL

24 Zip

32225

25 Country

Dual

29 Zip

32225

30 Country

Dual

9. Name and Address of Current Registered Agent

24 TATONAW, JOHN H JR ESQ
3040 SOUTH THIRD STREET
JACKSONVILLE BEACH FL 32250

25 RHONDA V. SANDERS
1763 PRONGHORN CT
JACKSONVILLE FL 32225

81 Name

82 Rhonda V. Sanders

83 Street Address (P.O. Box Number is Not Acceptable)

84 1763 Pronghorn Ct.

85 City

Jax

FL

85 Zip Code

32225

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)

03-04-98

12. OFFICERS AND DIRECTORS

TITLE D
NAME ROWE, THOMAS K
STREET ADDRESS 7840 ATLANTIC BLVD
CITY-ST-ZIP JACKSONVILLE FL 32211

TITLE D
NAME SANDERS, RHONDA Y
STREET ADDRESS 7840 ATLANTIC BLVD
CITY-ST-ZIP JACKSONVILLE FL 32211

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME 200002453222-6
1.3 STREET ADDRESS -03/10/98--01106--021
1.4 CITY-ST-ZIP *****900.00 *****900.00

2.1 TITLE P
2.2 NAME
2.3 STREET ADDRESS 1763 Pronghorn Ct.
2.4 CITY-ST-ZIP Jacksonville FL 32225

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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

REINSTATEMENT

14. I do 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:

Signature

03-04-98 94221500

CR2E034 (9/96)