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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

	-
DOCUMENT #	D0700007165

1. Corporation Name

BLUE MAX MOTORCARS, INC.

Principal Pla	ice of Business	Mailing Addre	ess			⊣ #	ABİRBƏLINƏ IQU	.ll	iil fo ih oo h		ANIAN ANNO NAN NAT	ł
1845 S.W. 4TH AVE STE. A-11 DELRAY BEACH FL 33444 DELRAY BEACH FL 33444							_				•	
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DEL	RAY BEACH FL 33483		}	83			* * * *	101 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	<u></u>	1285 (E. 1)	Site at the time	-
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				84	City					85 Zi	ip Code	
11. Pursuant	to the provisions of Sections 607.050)2 and 607.1508, Flo	orida Statutes, the ab	bove-	-named corpo	oration submits	this statem	nent for the p	FL ourpose of	<u> </u>	its registered	
	t to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations of the state of the sta	ations of, Section 607	ange was aumonzed 7.0505, Florida Statu	ı by tı utes.	ne corporatio	on's board of di	this staten rectors. I he	nent for the p ereby accept	the appoi	<u> </u>	its registered registered	_
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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 suppliemental 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 emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed pro on an attachment with an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/99 (561) 218-4400 Date Paytime Phone #

00E004 (44,000)