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 # P97000073614 (4)

NAPLES MOTORCARS OF DISTINCTION, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business			Mailing Address					s santenat ten inkre inmis amelt mårte mårte anere sæden ellin blinke sikke nege sant						
40 GOODLETTE ROAD. NORTH NAPLES FL 34102			40 GOODLETTE ROAD. NORTH NAPLES FL 34102											
		MAPLI					ļ	DO NOT WRITE IN THIS SPACE						
							<u> </u>	3. Date Incorpo	orated or Qualif	ied				7
!								08/25/199	97					
2. Principal Pi	ace of Business	2a. Ma	2a. Mailing Address					4. FEI Number Applied For						٦
21		26	26					59-3	46777	1		No	ot Applicable	
Suite, Apt.	#, etc.	Su	Suite, Apt. #, etc.							ı 🗆	\$8	3.75	Additional	1
22		27	27					Certificate of	Status Desired	י נ	•	Fee Ro	pquired	
City & State	9	Cit	City & State					6. Election Can	npaign Financir	ng	\$	5.00	May Be	7
23		28	28					Trust Fund C	Contribution				to Fees	
Zip	Country	Country Zip			Country			8. This corpora	tion owes or ha	as paid the cu	irrent y	ear Inf	tangible	٦
24	25	29		30				Personal Pro	perty Tax due	June 30.	🔀 Ye	s [] <u>No</u>	
	9. Name and Address of Curre	nt Registere	legistered Agent					10. Name and Address of New Registered Agent						
FAC	BA, ANTONIO ESQ				81	Name	•							
374 12TH AVE., SOUTH			82 Street			Address (P.O. Box Number is Not Acceptable)							\dashv	
	PLES FL 34102		•			Sileet Address (F.O. DOX Number is Not Acceptable)								1
1.00	200 12 01102				83									٦
						6 11						T		4
					84	City				FL	85	Zip	Code	1
11. Pursuant t	to the provisions of Sections 607.050	02 and 607.1	508, Florida Statut	es, the al	bove	-named	corpora	ation submits this	statement for	the purpose of	of char	nging il	ts registered	┨
office or re	e gister ed agent, or both, in the State in f am iliar with, and accept the obliq	e of Florida. S	Such change was a	authorize	d by	the con	poration	's board of direct	tors. I hereby a	iccept the ap	pointm	ent as	registered	
	in terminal with, and accept the oblig	rations of, oo	0.007.0007.0003,110	Jilda Giai	oles.	•								1
SIGNATURE	Signature, typed or printed name of registered ag	ont and title if app	olicable (NO1	£ Flegistere	d Ager	il signalum	e required v	when reinstaling)		DATE				ے
12.	OFFICERS AN			13.				ADDITIONS/C	HANGES TO C	FFICERS AN	D DIR	ECTOR	RS IN 12	ն
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Interest certain 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 informatio 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 thustee enipowered 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