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

CORPORATION
ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000079603 (1)** 

MOTOR CAR CONCEPTS II, INC.

FILED Feb 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 302 8 KIRKMAN RD 302 S KIRKMAN RD ORLANDO FL 32811 ORLANDO FL 32811 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/15/1997 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For sane Same 21 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #. etc 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name OZDEMIR, HAKAN 1508 HIGH GROVE WAY В2 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32818 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stgnature, type-d or printed name of registere Lagret and life if applicable (NOT) Registered Agent signature required when reinstating: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1 1 TITLE ☐ Change ☐ Addition TITLE OZDEMIR. HAKAN 1.2 NAME NAME 1508 HIGH GROVE WAY 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32818 CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change ☐ Addition ۷Ď 2.1 TITLE PARKER, DENNIS 2.2 NAME NAME 1655 5TH ST 2.3 STREET ADDRESS STREET ADDRESS **CKEARMONT FL 34711** 2 4 CHTY-ST-ZIP CITY-ST-ZIP Change ■ Addition DELETE TITLE 3.1 TITLE OZKAN, SERHAT 3 2 NAME NAME 1625 S KIRKMAN RD 3.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32811 3.4. CITY - ST-ZIP CITY-\$T-ZIP Change Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP C/TY-ST-ZIP Addition DELETE TITLE 5 1 TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE 6 2 NAME NAME 6.3 STREET ADDRESS

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 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 attachine with an address.

SIGNATURE

STREET ADDRESS CITY-ST-ZIP

SD 02/04/98 -107.298313