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14. I hereby certify that the information supplied with this filling does not qualify for the e Indicated on this annual report or supplemental annual report is true and accurate a officer or director of the corporation or the receiver or trustee empowered to execut Block 12 or Block 13 if changed, or on an attachment with an address.

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Apr 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENTO STATE CORPORATION Secretary of State Sandra B. Mortam ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000081984 (1) **BOAR MOTOR SALES CORPORATION** Principal Place of Business Mailing Address 1786 TRADE CENTER WAY, #6 1786 TRADE CENTER WAY. #6 NAPLES FL 34109 NAPLES FL 34109 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/16/1997 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable 21 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KALOUST, RONALD M 1786 TRADE CENTER WAY, #6 Street Address (P.O. Box Number is Not Acceptable) 82 NAPLES FL 34109 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. 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 (NOT): Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change TITLE 1.1 TITLE KALOUST, VAUGHN E NAME 1.2 NAME 4585 PASADENA COURT STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 34109 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE KALOUST, RONALD M NAME 2.2 NAME 4585 PASADENA COURT STREET ADDRESS 2.3 STREET ADDRESS NAPLES FL 34109 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 31 DILE KALOUST, FRANCES NAME 3.2 NAME 4585 PASADENA COURT STREET ADDRESS 3.3 STREET ADDRESS NAPLES FL 34109 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP LITY-ST-ZIP DELETE Change Addition TITLE 6.1 ITLE AME STREET ADDRESS TREET ADDRESS

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omption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of that my signature shall have the same legal effect as if made under oath; that I am an this report as required by Chapter 607, Florida Statutes; and that my name appears in

941-592-9128