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

P97000092066 (4) DOCUMENT #

FORMULA 1 EXOTIC CARS, INC.

FILED Jan 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								Bri Abria Bri	in mais that	
1245 WEST S		1245 WEST SUN								
FORT LAUDE	LE FL 33311			DO NOT WRITE IN THIS SPACE						
						3. Date Incorporated or Qualified				
						10/27/1997				
2. Principal P	lace of Business	2a. Mailing Address				4, FEI Number		Ap	plied For	
21		26	26			65-0791866 Not Appli			l Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75		
22		27				Solutions of States Bosinst	<u> </u>	Fee Re	<u> </u>	
City & State	9	City & State	⊢ '			6. Election Campaign Financing		\$5.00		
Zip	Country	28	Z _I D Country			Trust Fund Contribution		Added 1		
24	25	29	30	ır y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
241	9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
МО	NTE, FRANK		1	11 1	Name					
	15 WEST SUNRISE BLVD		82 Stree		Stroot Addror	ss (P.O. Box Number is Not Acceptate	vla)			
	RT LAUDERDALE FL 33311		83			ss (r.o. box Number is Not Acceptat				
					0					
	12.				City		FL		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 tilk- if applicable (NOTE: Registe					signature required		DATE.	PEOTOR	0.151.40	
12.	OFFICERS A	ND DIRECTORS	13. ΕΤΕ 1.1 ΤΙΤΙ			ADDITIONS/CHANGES TO OFFIC		Change	S IN 12 Addition	
NAME	MONTE, FRANK		1.2 NAM				L.	Johangs	PROBINSII	
STREET ADDRESS	1245 WEST SUNRISE BLVD	1	1.3 STRI		DDRESS				1	
CITY-ST-ZIP	FORT LAUDERDALE FL 333		1.4 CITY		.					
TITLE	<u> </u>	DEL			-			Change	☐ Addition	
NAME			2 2 NAM	IE						
STREET ADDRESS			2.3 STRI	ET AD	DDRESS					
CITY-ST-ZIP			2. 4 CIT	∕-ST-	ZIP					
TITLE		DEI	ETE 3.1 TITL	F				Change	Addition	
NAME			3 2 NAM	IE.						
STREET ADDRESS			3.3 STRI	ET AD	DDRESS				-	
CITY-ST-ZIP	·		3.4. CITY		ZIP			105	10000	
TITLE		☐ DEt					L	Change	Addition	
NAME		•	4. 2 NAM		200500					
STREET ADDRESS			4.3 STR						1	
CHY-ST-ZIP TITLE		DEL	4.4 CITY ETE 5.1 TITLE		ZIP			Change	Addition	
NAME		L., DEC	5.1 MJ				_			
STREET ADDRESS			5.2 NAW 5.3 S1R6		OORESS					
CITY-ST-ZIP			5.4 CITY							
TITLE		☐ DEL						Change	Addition	
NAME		•	6.2 NAM					•		
STREET ADDRESS			6.3 STR6		DORESS					
CiTY-ST-ZIP			6.4 CITY	- \$1 - 2	ZIP					
	artifu that the information supplied	with this filma does not o				ection 119 07(3)(i) Florida Statutes 1	further certif	v that the	information	

indicated on this annual report or supplied with this ming does not quality on the exemption stated in Section 1.19.07 (3)(), Florida Statutes, 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 chapped, or an attachment with an address.