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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000102813 (7)

PRO REMANUFACTURED ENGINES INC.

Mailing Address

FILED Apr 23 1998 8:00am Secretary of State

|--|

r incipal riace of business		Mailing Modless	Maning Modress						
160 N.W. 24TH STREET #25 BOCA RATON FL 33432			160 N.W. 24TH STREET #25						
BUCA HATON	N FL 33432	BOCA RATON FL 3343	52			DO NOT WRITE IN THIS S	SPACE		
					1	3. Date Incorporated or Qualified			
					-	12/05/1997			
2. Principal P	lace of Business	2a, Mailing Address				4. FEI Number		Applied For	
21		}a ~ ~	26			650800 7/1	· -	Not Applicable	
Suite, Apt	#, etc	Suite, Apt #, etc.				, ,		Additional	
22		⊢	27			5. Certificate of Status Desired	.	Required	
City & State	e	City & State				6. Election Campaign Financing	\$5.00	D May Be	
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Countr	y		8. This corporation owes or has paid the cur			
24	25 29 30		30	1		Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curre	ent Registered Agent	T			10. Name and Address of New Registered	Agent		
PIN	ITER, PAUL W		81	Nan	ne				
160 N.W. 24TH STREET #25			82	Stre	oot Addres	ss (P.O. Box Number is Not Acceptable)			
	CA RATON FL 33432				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ress (F.O. Box Nutriber is Not Acceptable)			
			83	\$					
			84	City			85 Zip	Code	
						FL			
11. Pursuant t	to the provisions of Sections 607.05	02 and 607,1508, Florida States of Florida, Such change wa	tutes, the above	/e-nam	ned corpor	pration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing	its registered	
agent La	m familiar with, and accept the obli	gations of, Section 607.0505,	Florida Statute	yıncı. ≳S.	JOI DOI BUILDI	or a board or directors. Thereby accept the app	JUNETICE DE	a registered	
SIGNATURE									
	Signature, typud or printed name of registered as	<u> </u>	OT: Registered Aç	jord signa	ature required				
12.	,	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	D	☐ DELETE	1.1 TITLE				Change	Addition	
NAME	PINTER, PAUL W			1.2 NAME					
STREET ADDRESS				1.3 STREET ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33432		1.4 CITY-	ST-ZIP					
TIFLE	☐ DELETE			2 1 TITLE			Change	☐ Addition	
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREE	T ADORES	SS				
CITY-ST-ZIP				2 4 CITY - ST - ZIP					
TITLE	DELETE 31						Change	Addition	
NAME	321								
STREET ADDRESS			3.3 STREE	T ADDRES	ss				
CITY-ST-ZIP			34 CITY	ST - ZIP					
TITLE	DELETE. 411						☐ Change	☐ Addition	
NAME			4 2 NAME					i	
STREET ADDRESS			4 3 STREE	I ADDRES	ss			i	
CITY-ST-ZIP			44 CITY -	ST - ZIP					
TITLE		☐ DELETE	51 TITLE			······································	Change	Addition	
NAME			5.2 NAME				=		
STREET ADDRESS			5 3 S1REE		ss				
CITY-ST-ZIP			5.4 CHTY-						
TITLE		DELETE	61 TITLE	ot ell			Change	Addition	
NAME			6.2 NAME						
STREET ADDRESS			6 3 STREE						
į			1		20				
CITY-\$1-ZIP			64 CITY-	si-zip	L				

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 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 changing, or organ attachment with the address.