SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** (9)PERFORMANCE MOTORCARS, INC. Principal Place of Business Mailing Address 3951 MERCANTILE P. O. BOX 755 NAPLES FL 33942 NAPLES FL 33939 3. Date Incorporated or Qualified 3a. Date of Last Report 03/23/1992 08/11/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0319802 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 П 27 Fee Required Oty & State City & State 6. Flection Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liab lity for intangible tax under s. 199 032 24 25 29 30 Florida Statutes Yes 📝 No 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name HIRSCHY, NANETTE L. 3951 MERCANTILE Street Address (P.O. Box Number is Not Acceptable) 82 NAPLES FL 33942 83 84 City 85 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 agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607 0505. Florida Statutes. SIGNATURE Signature, typed or pricted name of registered agent and tire if applicable (NOTE: Registered Agent signature required when reinst long) DAIL 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3/96) TITLE DELETE 11 TITLE Change Addition NAME HIRSCHY, NANETTE L 1.2 NAME CR2E034 STREET ADDRESS 3951 MERCANTILE 13 STREET ADDRESS CITY-ST-ZIP NAPLES FL 1.4 C:TY - ST - ZIP TITLE DELETE 2.1 Table Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST- ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY ST 2IP 5 4 CITY - ST - ZIP TITLE DELETE 61TITLE Change Addition NAME 6 2 NAME STREET ADDRESS 6.3 STREET ADDRESS City-St-2iP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, if further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that his sphart 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 617, Florida Statutes, and that my name appears in Block 12 or Block 3 if changed, or or (an attachment with an address. 6.4 CiTY - \$1 - 7/P Nanette L. Hirsdry 1/96 (941) 643-SIGNATURE: