FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	DIVISION	OF CORPORATIONS		
DOCUI	MENT # V5497	78 (4)			
GONZ	ALEZ MOTORS, INC.				
Principal Place	of Business	Mailing Address			
1013 \$ COMBEE RD 1013 \$ COMBEE RD			D		
LAKELAND F	L 33801	LAKELAND FL 3380	Я		
				3, Date Incorporated or Qualified 07/30/1992	3a. Date of Last Report 04/12/1995
2. Principal Pli 21	ace of Business	2a. Mailing Address		4. FEI Number 59-3212128	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	3	Crty & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	This corporation has liability for	Added to Fees
24	g. Name and Address of Curr	29	30	Florida Statutes 🔲 Yes	s 🛣 No
	g, Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New F	Registered Agent
GONZAL	EZ, JOAQUIN R			ddress (P.O. Box Number is Not Acceptate	5(5)
1013 S COMBEE RD				doress (F.O. Box Number is Not Acceptate	эе)
LAKELAN	ND FL 33801		63		
			84 City		85 Zip Code
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	atutes, the above-named cor	poration submits this statement for the pu	rnose of changing its registered office
	ed agent, or both, in the State of Flo th, and accept the obligations of, Se			poration submits this statement for the pu board of directors. Thereby accept the app	ointment as registered agent. I am
SIGNATURE					
12.	Signature, typed or printed name of registered agr	ent and title if applicable. ND DIRECTORS	(NOTE: Registered Agent signature rec		DATE
TITLE	P	DELETE	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12 Change Addition
NAME	GONZALEZ, JOAQUIN R		1.2 NAME		C Change C Addition
STREET ADDRESS	701 SPICEWOOD DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL		1.4 CITY-ST-ZIP		
THLE	V CONTAILET IOAOURNIA	☐ DELETE	2 1 TITLE		Change Addition
NAME	GONZALEZ, JOAQUIN V		2 2 NAME		
STREET ADDRESS	701 SPICEWOOD DR LAKELAND FL		2 3 STREET ADDRESS		
C/TY+ST+Z/P Title	S	□ DELETE	2.4 CITY - ST - ZIP 3. 1 TITLE		
NAME	HICKS, STEPHEN K	Detter	3.2 NAME		Change Addition
STREET ADDRESS	6961 HAYTER DR		33. STREET ADDRESS		
CITY-S1-ZIP	Lakeland fl		3 4 CITY - ST - ZIP		
TITLE		☐ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CiTY-SF-ZIP		Fineres	4.4 CITY - ST - ZIP		
TITLE NAME		DELETE	5. 1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			5.2 NAME		
CITY-SI-ZIP			5.3 STREET ADDRESS		
TITLE		DELETE	5 4 City - St - ZiP 6 1 Title		Change Addition
NAME			62 NAME		C) orange C) addition
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-7IP		
14. I do hereby	certify that the information supplied	with this filing is voluntarily for	urnished and does not qualif	y for the exemption stated in Section 119.	07(3)(k) Florida Statutes I further

rectify 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. I further certify that the information indicated on this 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 of 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 attachment with an address.

SIGNATURE: _

JOAQUÍN R. GONZALEZ 4-23-96 941-667-1474
OFFICER OR DIRECTOR
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