

**COPY OF APPLICATION FOR REGISTRATION COVERING THE FOLLOWING
DESCRIBED AUTOMOBILE IN COMPLIANCE WITH THE PROVISIONS OF THE VEHICLE
CODE OF THE STATE OF CALIFORNIA**

Resident County of _____

Name Sold to _____

Address _____

City _____ County _____

Make _____ Engine _____

Date First Sold _____ Body Type _____

V.I.N. _____ Model _____

Date First Operated _____

Motive Power _____

Have engine and serial numbers been checked against the vehicle? _____ Dealer's No. _____

Legal Owner ELITE ACPT CORP _____ ELT ID AKJ _____

Address 2500 AUBURN BLVD _____

City SACRAMENTO _____ State CA Zip 95821 _____

This is to certify that the undersigned dealer (No.) _____,
has on this date delivered to the Department of Motor Vehicles of the State of
California Dealer's Report of Sale and Application for Registration (No.)
_____, covering the above described automobile, and that
accordingly 20____ license plates No _____ have been
assigned by the Department of Motor Vehicles for the vehicle described above.

Dealer's Name: _____

By: _____

Date: _____