2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 660398 May 05, 2000 8:00 am Secretary of State JONES OIL & TIRE, INC. 05-05-2000 90067 039 ***150.00 Principal Place of Business Mailing Address 2661 US-27-SOUTH-2661 US 27 SOUTH SEBRING FL 33870-2127 SEBRING FL 33870-2127 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-1985572 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JONES, CHARLES BRANDON, JR. Street Address (P.O. Box Number is Not Acceptable) 2661 US 27 SOUTH SEBRING FL 33870 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE.IS \$150.00 .9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition ☐ Delete TITLE TITLE NAME JONES, CHARLES B. NAME STREET ADDRESS STREET ADDRESS 2661 U.S. 27 SOUTH CITY-ST-ZIP CITY-ST-ZIP SEBRING FL ☐ Change Addition ☐ Delete TITI F TITLE NAME JONES, MARGARET M. NAME STREET ADDRESS STREET ADDRESS 2661 U.S. 27 SOUTH CITY-ST-ZIP CITY-ST-ZIP SEBRING FL ☐ Change ☐ Addition STD ☐ Delete TITLE TITLE NAME JONES, DALE NAME STREET ADDRESS STREET ADDRESS 2661 U.S. 27 SOUTH CITY-ST-ZIP CITY-ST-7IP SEBRING FL ☐ Change Addition ☐ Delete TITLE TITLE JONES, STEVE NAME NAME STREET ADDRESS STREET ADDRESS 2661 US 27 SOUTH CITY-ST-ZIP CITY-ST-ZIP SEBRING FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME JONES, BARRY NAME STREET ADDRESS STREET ADDRESS 2661 US 27 SOUTH CITY-ST-ZIP CITY-ST-ZIP SEBRING FL ☐ Change Addition - Delete -- --TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRI

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Daytime Phone