2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State
05-23-2002 90045 032 ***150.00

DOCUMENT # F01000005410

1. Entity Name
BONSAL AMERICAN, INC.

Principal Place of Business	Mailing Address
8201 ARROWRIDGE BLVD. CHARLOTTE NC 28224-1148	8201 ARROWRIDGE BLVD. CHARLOTTE NC 28224-1148

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 58-2652780 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NATIONAL CORPORATE RESEARCH, LTD. 1406 HAYS STREET, SUITE 2 TALLAHASSEE FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD MCCULLOUGH, JOE 375 NORTHRIDGE RD. SUITE 350 ATLANTA GA 30350	☐ Delete	PRESIDENT JACOB FERRO 8201 ARROWRIDGE BLVD CHARLOTTE, NC 28273	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S VALENTINE, PAUL 375 NORTHRIDGE RD. SUITE 350 ATLANTA GA 30350	☐ Delete	VP J. DAVID MASKE 8201 ARROWRIDGE BLVD CHARLOTTE, NC 28273	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASD O'DRISCOLL, MICHAEL 375 NORTHRIDGE RD. SUITE 350 ATLANTA GA 30350	☐ Delete	VP JOHNSIE BECK 8201 ARROWRIDGE BLVD CHARLOTTE, NC 28273	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS HAAS, KEITH 375 NORTHRIDGE RD. SUITE 350 ATLANTA GA 30350	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS HICKMAN, GARY 375 NORTHRIDGE RD. SUITE 350 ATLANTA GA 30350	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BLACK, DOUG 375 NORTHRIDGE RD. SUITE 350 ATLANTA GA 30350	☐ Delete		☐ Change ☐ Addition

CR2E034 (9/01)

13. 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: S. David Maske J. DAVID MASKE 4-29-02 704-525-1621
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #