PUK PKUPII GUKPUKATIUN FILED UNIFORM BUSINESS REPORT (UBR) Apr 22, 2002 8:00 am Secretary of State DOCUMENT # F 76570 1. Entity Name MARK Automotive Service, INC 04-22-2002 90190 046 ***150.00 DO NOT WRITE IN THIS SPACE B0068265 2. Principal Place of Business 128 CAURT Sulte, Apt. A etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 10120<u>55-62</u> Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 58183 Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 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 DATE (NOTE: Recistered Agent signature required when reinstelling January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After May 1, Fee is \$550.00 Tax filing requirement and elects to do so. "Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS er som Parker i Livre de l'Occident de 50 MARR WILLIAM R, NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL nne TITLE MARR SHERRY (9424 SW 128 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST AP TITLE NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE TITLE NALA NAME STREET ADDRESS STREET ADDRESS CITY ST UP & CITY-ST-ZIP TITLE NAME MANE STREET ADDRESS STREET ADDRESS CITY-ST-78P CITY-ST- AP TITLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 bath; 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 on an attachment with an address, with all other like empowered.

CR2E034B (12/01