2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 19, 2002 8:00 am Secretary of State DOGŮMENT# P01000088269 1. Entjty Name KIRLAND MOTORS, INC. 05-19-2002 90186 017 ***150.00 Principal Place of Business Mailing Address C/O HODGSON RUSS LLP C/O HODGSON RUSS LLP 1801 N. MILITARY TRAIL, SUITE-200 1801 N. MILITARY TRAIL: SUITE 200 BOGA RATON FL 33431 -BOCA-RATON-FL-33431 2. Principal Place of Business 3. Mailing Address 350 WEST COPANS ROAD 350 WEST COPANS ROAD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For POMPANO BEACH, FL POMPANO BEACH, FL 22-3833282 Not Applicable Zip Country Zip Country \$8.75 Additional 33064 5. Certificate of Status Desired П USA 33064 USA Fee Required 6. Name and Address of Current Registered Agent '7." Name and Address of New Registered Agent Name HRAWG CORP. Street Address (P.O. Box Number is Not Acceptable) 1801 N. MILITARY TRAIL SUITE 200 **BOCA RATON FL 33431** City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (P,D) TITLE ☐ Delete TITLE CR2E034 (9/01) Change ☐ Addition Robert A. Kirland NAME NAME STREET ADDRESS 350 West Copans Road STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Pompano Beach, FL 33064 TITLE ☐ Delete TITLE Change Addition NAME Mitchell B. Kirschner, Esq. NAME STREET ADDRESS 1801 N. Military Trail, Suite 200 STREET ADDRESS CITY-ST-ZIP_ CITY_ST_ZIP Boca Raton, FI 33431 TITLE Delete (AS,CFO) Change ☐ Addition NAME Frank S. Montemerlo 350 West Copans Road Pompano Beach, FL 33064 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME Rowena Kirland NAME STREET ADDRESS 350 West Copans Road STREET ADDRESS CITY-ST-ZIP Pompano Beach, FL 33064 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS 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 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

Daytime Phone #