

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90164 030 ***150.00

DOCUMENT # P37142

1. Entity Name

NATIONAL ELECTRONICS WARRANTY CORPORATION OF FLO

Principal Place of Business

Mailing Address

44873 FALCON PLACE, SUITE 174
 STERLING VA 20166
 US

44873 FALCON PLACE, SUITE 174
 STERLING VA 20166-9643
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

54-1627746

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MEENAN, TIMOTHY
204 S. MONROE STREET
TALLAHASSEE FL 32302-3068

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, 2000 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: PCD Delete
 NAME: SCHAUFELD, FREDERICK D
 STREET ADDRESS: 44873 FALCON PLACE, #174
 CITY-ST-ZIP: STERLING VA

TITLE: D Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: VD Delete
 NAME: NADER, ANTHONY P
 STREET ADDRESS: 44873 FALCON PLACE, #174
 CITY-ST-ZIP: STERLING VA 20166

TITLE: PD Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: VS Delete
 NAME: HORVATH, ROBERT D JR
 STREET ADDRESS: 44873 FALCON PLACE
 CITY-ST-ZIP: STERLING VA 20166

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: TD Delete
 NAME: WHITE, CLIFFORD A
 STREET ADDRESS: 44873 FALCON PLACE, #174
 CITY-ST-ZIP: STERLING VA 20166

TITLE: VTD Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: V Delete
 NAME: BLOOM, MARTIN
 STREET ADDRESS: 44873 FALSON PLACE
 CITY-ST-ZIP: STERLING VA 20166

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 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)(f), 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:

Robert D Horvath, Jr
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.19.2000

703.810.8880

Date

Daytime Phone #

CRPE034 (9/99)