

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000007059

1. Entity Name

LEXTECH AUTOMOTIVE, INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90197 006 ***150.00

Principal Place of Business

Mailing Address

27526 BERETTA DRIVE
 BONITA SPRINGS FL 34135

27526 BERETTA DRIVE
 BONITA SPRINGS FL 34135-3542

2. Principal Place of Business

27683 Old 41 Road
 Suite, Apt. #, etc.

3. Mailing Address

27683 Old 41 Road
 Suite, Apt. #, etc.

City & State

Bonita Springs FL 34135

City & State

Bonita Springs
~~Florida~~ FL

4. FEI Number

59-35-52700

Applied For

Not Applicable

Zip

34135

Country

USA

Zip

34135

Country

USA

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

KUNKLE, JAMES B
 27526 BERETTA DRIVE
 BONITA SPRINGS FL 34135

7. Name and Address of New Registered Agent

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

James B Kunkle

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-29-00

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	KUNKLE, JAMES B	27526 BERETTA DRIVE	BONITA SPRINGS FL 34135	<input type="checkbox"/>
D	VASSEUR, THOMAS A	997 BRIARWOOD BLVD.	NAPLES FL 34104	<input type="checkbox"/>
D	BETZ, ROBERT L	3003 26TH ST. S.W.	LEHIGH ACRES FL 33971	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

Thomas A Vasseur

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS A. VASSEUR 3-29-00

DATE

941 495-2886

DAYTIME PHONE #

CR2E034 (9/99)