

FILED
May 19, 2001 8:00 am
Secretary of State

05-19-2001 90278 015 ***150.00

DOCUMENT # P99000004528

1. Entity Name

A & D LOCK & KEY OF USA INC.

Principal Place of Business

Mailing Address

NEW ADDRESS

2. Principal Place of Business

530 WEST WHEELER RD.

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SEFFNER, FLORIDA

City & State

4. FEI Number

59-3548921

Applied For

Not Applicable

Zip

33584

Country

U.S.A.

Zip

Country

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

MICHAEL D. PASEK
4851 85th AVE.
PINELLAS PARK, FL 33781

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 the filer, applicable

(NOTE: Registered Agent signature required when "Certificate of Status Desired" is checked)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elect to do so, regardless of whether it is a corporation or partnership, or other entity, for purposes of the intangible tax.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$450.00
Make Check Payable to Department of State

10. Election Campaign/Financing Contribution: **\$5.00 May Be**
 11. Election Campaign/Financing Contribution: **Added to Fees**

11. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: **PRESIDENT**
 NAME: **DANUTA WIDLAK**
 STREET ADDRESS: **530 WEST WHEELER RD.**
 CITY-STATE-ZIP: **SEFFNER, FL 33584**

TITLE: **Change** ☒ **Addition** ☐
 NAME: **← New street**
 STREET ADDRESS: **← New street**
 CITY-STATE-ZIP: **← New street**

TITLE: **VICE-PRESIDENT**
 NAME: **BOGUSLAW WIDLAK**
 STREET ADDRESS: **530 WEST WHEELER RD.**
 CITY-STATE-ZIP: **SEFFNER, FL 33584**

TITLE: **Change** ☒ **Addition** ☐
 NAME: **← New street**
 STREET ADDRESS: **← New street**
 CITY-STATE-ZIP: **← New street**

TITLE: **NAME**
 STREET ADDRESS: **NAME**
 CITY-STATE-ZIP: **NAME**

TITLE: **Change** ☐ **Addition** ☐
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TITLE: **Change** ☐ **Addition** ☐
 NAME: **NAME**
 STREET ADDRESS: **NAME**
 CITY-STATE-ZIP: **NAME**

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.

DANUTA WIDLAK
PRESIDENT

05/01/01

(813)684-1789

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #