FOR PROFIT CORPORATION uniform business report (UBR)

FILED Mar 19, 2002 8:00 am Secretary of State

| DO NOT WRITE IN THIS SPACE 2. Perception Places of Survives 2.269 S. University Drive Suite 216 Ft. Lauderdale, Florida Zip 33301 County 33301 County 33301 County 33302 County 33302 DO NOT WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE Suite 216 City Salies DO NOT WRITE IN THIS SPACE Suite 216 City Davie, FL Embardates of Current Andrews of Current Andre | DOCUMENT # 180737 1. Entity Name Davis Motors, Inc./ | | | | 03-19-2002 90017 022 ***150.00 | | |
|---|--|---|-------------------------------------|------------------------------|--|----------------------------|--|
| Suite Apt 4 pc. Suite 216 County USA Jo 200 County USA Jo 33324 Local County USA Jo 1 here and Address of Current Registered Agent Michael F. Kennedy, CPA Street Adapts of County Suite Value City Davie, Suite 216 City Davie, FL 20, County Suite 216 City Davie, Suite Address of Current Agents Suite Address of Current Agent National Address of Current Agent Suite Address of Curren | | | | | 425635 | | |
| City & State Florida Davie Florida Size Sp-0756718 Species Fr. Lauderdale Florida Davie Florida Sy-0756718 Size Species Sy-0756718 | 436 N. Federal Highway 2269 S. Univ | | | |] | | |
| Second Country Seco | | | City & State | | L L | | |
| This are not present any present and present and present and present any present any present and present any present and present and present any present and present any present and present and present any present and present any present and present any prese | Zip Country Zip | | Zip | Country | 5. Certificate of Status Desired \$8.75 Additional | | |
| ### Added to Fees ### Added to | | | | | 7. Name and Address of Current Registered Agent | | |
| Sirect Address (9 O. 80 Number is Not Acceptable) IN THIS SPACE Suite 216 City Davie, FL 210 Codes City Davie, FL 210 Codes 3 33324 8. The above named entity-colprists this statement for the propose of changing its registered affice or registered agent, or both, in the State of Florida. Michael F. Kennedy, CPA SIGNATURE Suprame, Speed or prend name of registered agent across the space of the space o | | | | Name Michael F. Kennedy, CPA | | | |
| 8. The above named entity-apprils this statement for the purpose of changing its registered agent, or both, in the State of Florida. **Nichael F. Kennedy, CPA** **Signature Speed or preson amount regionant agent and title if subtants.** **NoTE Registered Appril sequence required when remissing.** **District Corporation is eligible to satisfy its intangible Tark filing requirement and elects to do so. January 1. Mey 1 Fee is \$150.00 Amended UBR is \$51.25 and After May 1 Fee is \$55.00 Amended UBR is \$51.25 and After May 1 Fee is \$51.25 and After | | | | | | | |
| 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Signature Speed for priced round of registered for the Purpose of Changing its registered agent, or both, in the State of Florida. Michael F. Kennedy, CPA Michael F. Kennedy, CPA 9. This corporation is eligible to satisfy its intangible Task filting requirement and elects to do so. Gee criteria on bock) OFFICERS AND DIRECTORS TILE P/T Manning; Marjorie T. STREET ADDRESS CITY-SI-2P SCOttsdale, AZ 85260 TILE NAME Shaff, Cheryl A. STREET ADDRESS CITY-SI-2P SCOttsdale, AZ 85260 TILE NAME SINGER ADDRESS CITY-SI-2P TILE | in iris space | | | · Sud | Suite 216 | | |
| SIGNATURE Signature Speed or prised carme of registancial agent and time if splatnates NOTE Registance Apent signature required when reinstancing) 9. This corporation is eligible to setisfy its intangible Tark filing requirement and elects to do so. (See criterio on back) 11. OFFICERS AND DIRECTORS 11. ITILE NAME STREET ADDRESS CITY-ST-2P TITLE V STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2P TITLE TITLE NAME STREET ADDRESS CITY-ST-2P TITLE TITLE STREET ADDRESS CITY-ST-2P TITLE TITLE STREET ADDRESS CITY-ST-2P | | | | " City | | Zip Code 33324 | |
| After May 1, Fee Is \$55.00 See criteria on back) After May 1, Fee Is \$55.00 Anemoded UBR is \$61.25 Nake Check Payable to Department of State Trust Fund Contribution. Title Manning, Marjorie T. 11056 N. 78 St. 11056 N. | SIGNATURE WILDER Kennedy, CPA | | | | | | |
| TITLE | Tax filing requirement and elects to do so. After May 1, Fee is \$550.00 Amended UBR is \$61.25 | | | | Trust Fund Contribution. | | |
| MAME SIRET ADDRESS CITY-ST-ZIP TITLE NAME SIRET ADDRESS CITY-ST-ZIP | 11. | \$P/V | DIRECTORS | | | | |
| SIRET ADDRESS CITY-ST-ZIP SCOTTS AZ S5260 CITY-ST-ZIP SCOTTS AZ S5260 CITY-ST-ZIP NAME SIRET ADDRESS CITY-ST-ZIP SCOTTS AZ S5260 CITY-ST-ZIP TITLE NAME SIRET ADDRESS CITY-ST-ZIP | | | | | | | |
| CITY-ST-ZIP SCOTTSdale, AZ 85260 CITY-ST-ZIP ITILE V/S INNAME SIREET ADDRESS CITY-ST-ZIP ITILE NAME SIREET ADDRESS CITY-ST-ZIP | | AME Manning; Marjorie T. | | | | | |
| NAME SIRET ADDRESS CITY-ST-ZIP TITLE SIRET ADDRESS CITY-ST-ZIP | CITY-ST-ZIP | GIY-ST-ZIP Scottsdale, AZ 85260 | | | | | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | TITLE V/S | | TITLE | | | | |
| CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP | NAME Shaff, Cheryl A. | | | 1 | | | |
| TITLE NAME Shaff, David H. 11056 N. 78 St. CITY-ST-ZIP SCOttsdale, AZ 85260 - CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP SCOTTS-DELLAR STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | 10 | | and the second | | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | NAME Shaff, David H. | | | | | , | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | IND MOT MIR! | nte l | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Scottsdale, AZ 8526 | 0 | | | | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | in this spa | CE | |
| TITLE | - | | | | • | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TOTALE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | CITY-ST-ZIP | | | CITY-ST-ZIP | | | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | | | | Į. | | | |
| NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP | | | } | | | | |
| STREET ADDRESS CITY-S1-ZIP STREET ADDRESS CITY-ST-ZIP | TITLE | | | TITLE | | | |
| CITY-ST-ZIP CITY-ST-ZIP | | | | į. | | • | |
| | | |] | | • | ١ | |
| | 1 | ertify that the information supplied with t | his filing does not qualify for the | | ection 119 07(3)(i). Florida Statutes I further co | rtify that the information | |

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.

368-7113

Phone: (480)

Davis Motors, Inc. C/o M. F. Kennedy, Agent for Davis Motors, Inc. 2269 S. University Drive; Suite 216 Davie, FL 33324

February 25, 2005

425635

Uniform Business Report Division of Corporations Florida Department of State PO Box 1500 Tallahassee, FL 32302-1500

Subject: UBR, Document No. 180737 Notification Regarding Changes

Please note that the attached Uniform Business Report, for Davis Motors (Document No. 180737), includes the following four (4) changes:

- 1. Change of Principal Address
- 2. Change of Mailing Address
- 3. Change of Officers and Titles
- 4. Change of Name and Address of Registered Agent

Your considerations in documenting these changes will be appreciated. Thank you.

Very truly yours,

Mayne T. Manny Com.

Marjorie T. Manning President

4) A substitute of the project of different processors are presented by the analysis of the property of the processors of the processor of the