2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 239622** Jan 12, 2000 8:00 am 1. Entity Name **Secretary of State** DERUITER ELECTRIC MOTOR CO. 01-12-2000 90114 004 ***150.00 Mailing Address Principal Place of Business 14261 S DIXIE HWY 14621 SW 66 AVE MIAMI FL 33158-1825 MIAMI FL 33176 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-0904562 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DERUITER, J L Street Address (P.O. Box Number is Not Acceptable) 14621 SW 66TH AVE MIAMI FL Zip Code FL 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition □ Delete TITLE TITLE NAME NAME DERUITER, J L STREET ADDRESS STREET ADDRESS 14621 SW 66TH AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change Addition TITLE STD ☐ Delete TITLE NAME NAME DERUITER,E G STREET ADDRESS 14621 SW 66TH AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change Addition ☐ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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. James L. DeRuiter 1/4/2000

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR