

**FILED**  
**May 29, 2002 8:00 am**  
**Secretary of State**

05-06-2002 90140 031 \*\*\*158.75

**2002 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # 375804**

1. Entity Name

**AMPCO ELECTRIC, INC.**

Principal Place of Business

**3949 SW 12 COURT  
FT. LAUDERDALE FL 33312  
US**

Mailing Address

**3949 SW 12 COURT  
FT. LAUDERDALE LF 33312  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-131-3398**

**NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**KATULKA, MICHAEL A  
3949 SW 12 CT  
FORT LAUDERDALE FL 33312**

7. Name and Address of New Registered Agent

Name **KATULKA, SANDRA**

Street Address (P.O. Box Number is Not Acceptable)

**3949 SW 12TH CT.  
FT. LAUDERDALE, FL 33312**

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

*Sandra Katulka*

**SANDRA KATULKA, PRES.**

**4-25-02**

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, 2002 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	PD KATULKA, MICHAEL A 3949 SW 12TH ST. FORT LAUDERDALE FL 33312	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KATULKA, SANDRA 3949 SW 12TH ST. FORT LAUDERDALE FL 33312	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KATULKA, CHARLES 3411 SW 13TH COURT FORT LAUDERDALE FL 33312	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SANDRA KATULKA 3949 S.W. 12TH CT. FT. LAUDERDALE, FL 33312	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MICHAEL KATULKA 3949 SW 12TH CT. FT. LAUDERDALE, FL 33312	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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. **SANDRA KATULKA, PRES**

SIGNATURE:

*Sandra Katulka Pres*

**4/25/02**

Date

Daytime Phone #

**(954) 584-1642**

CR2E034 (9/01)