## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Sep 18, 2000 8:00 am Secretary of State **DOCUMENT # 388568** 1. Entity Name MECHANICAL REBUILDERS, INC. 09-18-2000 90004 031 \*\*\*550.00 Mailing Address Principal Place of Business 1663 10TH WAY 1663 10TH WAY SARASOTA FLA 34236 SARASOTA FLA 34236 UUU8647() 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For-City & State City & State ... 4.\_FEI Number-59-1359763 Not Applicable Zip Country \$8.75 Additional 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 HERTZLER, DWIGHT E. Street Address (P.O. Box Number is Not Acceptable) 1663 10TH WAY SARASOTA FL 34236 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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PD ☐ Addition TITLE Delete TITLE HERTZLER, DWIGHT E NAME NAME 1663 10TH WAY STREET ADDRESS STREET ADORESS SARASOTA, FL 00000 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Detete HERTZLER, JOYCE NAME NAME 1663-10TH WAY -STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 00000 CITY-ST-7IP Change TITLE ☐ Delete TITLE ☐ Addition HERTZLER. DWIGHT E NAME NAME 1663 10TH WAY STREET ADDRESS STREET ADDRESS SARASOTA, FL 00000 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change HERTZLER, JOYCE NAME NAME 2364 FLOYD ST. STREET ADDRESS STREET ADDRESS SARASOTA, FL 00000 CITY-ST-7IP CITY-ST-Z(P ☐ Change ☐ Addition ☐ Delete TITLE TITLE CHAPMAN, KENNETH NAME 1920 GOLF ST. STREET ADDRESS STREET ADDRESS SARASOTA FL CITY-ST-ZIP CITY-ST-ZIE

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

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

DHentzler Pres. 9-12-00

☐ Delete

Change

☐ Addition