2001 UNIFORM BUSINESS REPORT (UBR)

May 16, 2001 8:00 am Secretary of State DOCUMENT # 406455 ROMAN ELECTRIC AND CARBURETOR SERVICE, INC. 05-16-2001 90375 010 ***150.00 Principal Place of Business Mailing Address 401 MANGO AVENUE 401 MANGO AVENUE 80056891 H-1 SARASOTA FL 34237 SARASOTA FL 34237 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1419091 Not Applicable Zip \$8.75 Additional Country Zip Country 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name ROMAN, RONALD L. Street Address (P.O. Box Number is Not Acceptable) 390: 301 BLVD:: WEST #27-A BRADENTON-FL-34205 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) 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, 2001 Fee will be \$550.00 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 111. ☐ Addition TITLE ☐ Change TITLE ☐ Delete ROMAN, PAUL DAVID NAME NAME 4624 ALHAMBRA AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34238 PD ☐ Delete TITLE ☐ Addition TITLE ROMAN, RUDOLPH NAME NAME 2647 SYDELLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SARASOTA FL Addition TITLE TITLE ☐ Delete SO BRE ARDMORE ROMAN, RICHARD NAME NAME 18316 ARDMORE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VILLA PARK IL CITY-ST-ZIP STD ☐ Addition ☐ Delete TITLE TITLE ROMAN, RONALD NAME NAME 5196 CEDAR HAMMOCK STREET ADDRESS STREET ADDRESS SARASOTA FL 34237 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered

May 5, 2001 941 366 4089

FILED