2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 529892 Feb 26, 2000 8:00 am 1. Entity Name **Secretary of State** K & B FOREIGN CAR SERVICE, INC. 02-26-2000 90034 019 ***150.00 Principal Place of Business Mailing Address 2300 HIGHWAY US #1 2300 HIGHWAY US #1 VERO BEACH FL 32960 VERO BEACH FL 32960 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1736721 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KOWALCZYK, ZDZISLAW Street Address (P.O. Box Number is Not Acceptable) 2300 HIGHWAY US #1 VERO BEACH FL 32960 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 (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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 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 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME KOWALCZYK, ZDZISLAW STREET ADDRESS STREET ADDRESS 2300 HIGHWAY US #1 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32960 TITLE Change Addition ☐ Delete TITLE KOWLACZYK, ELZBIETA NAME NAME STREET ADDRESS STREET ADDRESS 2300 HIGHWAY US #1 CITY - ST - ZIP CITY-ST-ZIP VERO BEACH FL 32960 ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME

13. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

FIRMERS KOWALCZYK 2-18.00 561589 3070