2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State
04-23-2002 90405 018 ***150.00

DOCUMENT # 848025

1. Entity Name
CAR KEM PRODUCTS, INC.

Principal Place of Business	Mailing Address
~~215 COASTLINE ROAD~~ SANFORD FL 32771-6631	~~215 COASTLINE ROAD~~ SANFORD FL 32771-6631

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4275 St Johns Parkway	4275 St Johns Parkway
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sanford, FL	City & State: Sanford, FL
Zip: 32771 Country:	Zip: 32771 Country:

4. FEI Number: 52-0625286 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LA FLEUR, MARTYN ~~215 COASTLINE RD~~ SANFORD FL 32771	Name Street Address (P.O. Box Number is Not Acceptable): 5300 Vista Club Run City: Sanford **FL** Zip Code: 32771

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

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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LAFLEUR, MARTYN ~~1110 N. PENINSULA AVE.~~ ~~NEW SMYRNA BEACH FL~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5300 Vista Club Run Sanford, FL 32771
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD LAFLEUR, PATRICIA ~~1110 N. PENINSULA AVE.~~ ~~NEW SMYRNA BEACH FL~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5300 Vista Club Run Sanford, FL 32771
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MELITSHKA, WALTER E., JR 173 HAVILLAND STREET LONGWOOD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V STICKELS, DAVID E 207 CANTERCLUB TRAIL LONGWOOD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LUCIDO, GREG C 9217 NEPTUNES BASIN CT. BOCA RATON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/01)

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.

SIGNATURE: Martin F. LaFleur MARTIN H. LaFleur 4/12/2002 (407) 323-5626
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #