FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 2:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **850643** **(8)**

1. Corporation Name
MOTOR POWER INDUSTRIES CORPORATION

Principal Place of Business
8230 H PRESTON COURT
JESSUP MD 20794

Mailing Address
8230 H PRESTON COURT
JESSUP MD 20794

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/08/1981**
3a. Date of Last Report: **05/17/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt. # or Rm. — 22
Suite Apt. # or Rm. — 27
City & State — 23
City & State — 28
24 25 29 30

4. FEI Number: **52-0787668** — Applied For / Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. The corporation has submitted for affiliate tax under S. 199.032 Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
BROOKS, KIRBY V., JR.
1525 HILLTOP LANE
MERRITT ISLAND FL 32952

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — **FL** — 85 Zip Code

11. Pursuant to the provisions of Section 607.0501, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Further, and authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of registered agent under Florida law.

SIGNATURE

12. OFFICER AND DIRECTOR

TITLE P NAME MACDONALD, GEORGE E. STREET ADDRESS 8230 H PRESTON COURT CITY, ST, ZIP JESSUP MD	
TITLE V NAME BROOKS, KIRBY V., JR. STREET ADDRESS 677 GEORGE KING BLVD. CITY, ST, ZIP CAPE CANAVERAL FL	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this report, including, if applicable, the annual report, does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 agent of the corporation for the purpose of executing this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on the attached with any address.

SIGNATURE: Pres. 4/11/95 301-726-8080

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0477339 FP