| | UMENT # A01 | 000001199 🖅 | | |
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| PERFORMANCE FIBERGLASS REPAIR, LTD | | | | FILED |
| Principal P | Place of Business | Mailing Address | | 2002 OCT 1 1 AM 10: 34 |
| ľ | TENAY PKWY | 6340 MANILA DR. | | DIVISION OF CORPORATIONS |
| UNIT 233 MERRITT ISL | LAND FL 32952 | COCOA FL 32927 US | | TALLAHASSEE, FLORIDA |
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| · · · · · · · · · · · · · · · · · · · | pt. #, etc. | Suite, Apt. #, etc. | | DUE BY SEPTEMBER 25, 2002 |
| COCC | <u>x, f1</u> | City & State | fi. | 4. FEI Number Applied For Not Applicable |
| 320 Zip | 22 Country Bruford | 320 800 | Country | 5. Certificate of Status Desired \$8.75 Additional Fee Required |
| | 6. Name and Address of C | urrent Registered Agent | Name | 7. Name and Address of New Registered Agent |
| | HE, JACOB A | | | |
| | NILA DR | | Street Add | ress (P.O. Box Number is Not Acceptable) |
| COCOA | FL 3292/ | | | |
| | | | City | Zip Code |
| the obliga | eations of registered agent. | nent for the purpose of changing it | s registered office or re | gistered agent, or both, in the State of Florida. I am familiar with, and accept |
| the obligation of the obligati | Signature, typed or printed name of registerer | d agent and title if applicable. | | gistered agent, or both, in the State of Florida. I am familiar with, and accept |
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14. | indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER 9/20/02 (321)