2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F0,000006229 1. Entity Name WHEELER INDUSTRIES, INC. (WINC)					FILED Apr 23, 2001 8:00 am Secretary of State 04-23-2001 90098 011 ***158.75				
Principal Place of Business Mailing Address 3414 N.W. 32ND STREET 3414 N.W. 32ND STREET FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 33309			09			•			
Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State		4.	FEI Number 52	-2260363	 }	pplied For ot Applicable	
Zip	Country	Zip	Country	5.	Certificate of Statu	s Desired	\$8.75 Ad Fee Require	ditional	
	6. Name and Address of Current	Registered Agent		7.	Name and Addres	s of New Registe	red Agent		
WHEELER JR, ERNEST J 3414 N.W. 32ND STREET FORT LAUDERDALE FL 33309				Street Address (P.O. Box Number is Not Acceptable)					
FORI	LAODENDALE PE 33309		City				FL Zip Coo	le .	
Tax filing	Signature, typed or printed name of registered agent oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!	01 Fee will be \$5	00 550.00	10. Election Ca	D ampaign Financing Contribution.		00 May Be	
11.	OFFICERS AND	DIRECTORS	12.	AI	DDITIONS/CHANG	ES TO OFFICERS	AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD WHEELER JR, ERNEST J 3414 N.W. 32ND STREET FORT LAUDERDALE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		33369	3-542Y	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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	
TITLE NAME		☐ Delete	TITLE				☐ Change	☐ Addition	

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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: ZMO

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daysime Phone #