FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91293 028 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003365

1. Entity Name

Dent Wizard International Corporation ✓

11023723

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
6205 Peachtree Dunwoody Rd	6205 Peachtree Dunwoody Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc. Attn: Corp Tax Dept - 12th Flr
City & State: Atlanta, GA	City & State: Atlanta, GA
Zip: 30328 Country: USA	Zip: 30328 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 58-2416024 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City: Tallahassee **FL** Zip Code: 32301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
President	John Mellott, 6205 Peachtree Dunwoody Rd, Atlanta, GA 30328
Vice Pres.	Dean Eisner, 6205 Peachtree Dunwoody Rd, Atlanta, GA 30328
Treasurer	Richard Jacobson, 6205 Peachtree Dunwoody Rd, Atlanta, GA 30328
Secretary	Andrew A. Merdek, 6205 Peachtree Dunwoody Rd, Atlanta, GA 30328
Director	Jamie Porter, 6205 Peachtree Dunwoody Rd, Atlanta, GA 30328
Director	Michael Langhorne, 6205 Peachtree Dunwoody Rd, Atlanta, GA 30328

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CR2E034B (12/02)

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Andrew A. Merdek 4/23/03 678-645-0000

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