2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) F9900003947 DOCUMENT # 1. Entity Name SMART START IGNITION INTERLOCK, INC.



			COD WE THE	9
Principal Plac 4850 PLAZA D IRVING TX 750	RIVE	Mailing Address 4850 PLAZA DRIVE IRVING TX 75063		
2. Principal Place of Business 3.		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI Number 75-2447950 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Curr	ent Registered Agent	<u> </u>	7. Name and Address of New Registered Agent
			Name	
TUNKEL, IRENE 300 E.LAKEWOOD CIRCLE			Street Addre	ess (P.O. Box Number is Not Acceptable)
MARGATE	FL 33063			
3			City	FL Zip Code
	ions of registered agent.		IS registered office of reg	istered agent, or both, in the State of Florida. I am familiar with, and accept
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550. c Payable to Florida Departmen		1 1.	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, FRANK 3511 LINDEWOOD DALLAS TX 75205	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST BALLARD, JAMES R 4850 PLAZA DRIVE IRVING TX 75063	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMMER, DAVID W 4419 LANDPIPER COURT DALLAS TX 75287	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HICKS, SYDNEY 6338 PARK LANE DALLAS TX 75225	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RODGERS, BETTYE A ROUTE 3, BOX 600, LATIGO FLOWER MOUND TX 75022	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
CITY-ST-ZIP	DC RODGERS, JAY D ROUTE 3, BOX 600, LATIGO I FLOWER MOUND TX 75022		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition Change Addition

indicated on this report or suppliemental 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 Block 11 if changed, or on an attachment with an address with all phyrike empowered.

SIGNATURE: