FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G79484

(3)

NATIONWIDE BATTERY, INC.

Principal Place	e of Business		Mailing	Mailing Address 3381 SW 11TH AVE 921 S.E. 20TH STREET FT. LAUDERDALE FL 33315-2901 US						. 	\$1 5 11 (55 1
3381 SW 11TH FT. LAUDERDA US			921 S.E								
00								3. Date Incorporated or Qualified 01/19/1984 03/18/1996			
2. Principal Pi	lace of Busin	ess	2a. Mai	2a. Mailing Address				4. FEI Number		Ap	plied For
11			26					59-2494893			t Applicable
Suite, Apt.	#, etc.		27 Suit	Suite. Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State	e		— — <i>'</i>	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Zip Country			Zip Country				8. This corporation has liability for intangible tax under s. 199.032,			
4		25	29	29 30				Florida Statutes Yes No			
9. Name and Address of Currer			ent Registere	Registered Agent			10. Name and Address of New Registered Ager			Agent	
BOY	/ER, LYLE E	Blandon, Jr.			1	81	Name				
	1 SW 11 TH	1 AVE LE FL 33315					Street Add	ess (P.O. Box Number is Not Acceptable)			
FI.	DAUDENDA	TE LE 303 13				B 3					
						84	City		FL B5		Code
Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. Such change was 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, Section 607.0505, Florida Statutes. SIGNATURE Signature, typesfor perfect come of registered agent and the diagraphicable. INOTE: Registered Agent signature required when reinslating) DATE											
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informatic I am an c appears	iby certify that on indicated a officer or direa in Block 12 c	it the information support this angular eport of the deportation of the deportation by Block Williams changed	or supplements or supplements of the receive of all attack	ang does not qually annual report is or trustee empo or trustee empo	s true and a owered to e ddress.	exec accu	urate and tha cute this repo	of in Section 119 07(5)(), Florida Station at my signature shall have the same leg- ort as required by Chapter 607, Florida	al effect a Statutes; a	s if made un and that my r	der oath; that name

INTED NAME OF SIGNING OFFICER OR DIRECTOR

January 0,1997