2000 UNIFORM BUSINESS REPORT (UBR)			
DOCUMENT # (	FILED		
NATIONWIDE BATTERY INC			
TOTATION TOTAL TOT			00 FEB 14 AM 11: 09
Principal Place of Business 3387 SWII AVENUE PLANDERDUE 33315	Mailing Address 3381 SW Pl Laudude 3331	11 Avenue Le Fi	SECRETARY OF STATE TALLAHASSEE, FLORIDA
2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State	City & State		4. FEI Number Applied For Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required
6. Name and Address of Current F	Registered Agent	Name	-7. Name and Address of New Registered Agent
3281 SW 11 AIC	1011 21.	Street Address (	P.O. Box Number is Not Acceptable)
Muderdale Fr	33315		
M. Complete of the		City	FL Zip Code
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.			
SIGNATURE    Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)    DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	After MAY 1, 200	I FEE IS \$150.00 0 Fee will be \$550.00 e to Department of Sta	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees
11. OFFICERS AND D		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  Change Addition
NAME STREET ADDRESS CITY-ST-ZIP  Lauderdale	11.0	NAME STREET ADDRESS CITY-ST-ZIP	Orlange Accition
TITLE	☐ Del€te	TITLE	☐ Change ☐ Addition
NAME STHELL ADDRESS CITY OF JULY		NAME STREET ADDRESS	
CITY-ST-ZIP TITLE	☐ Delete	CITY-ST-ZIP TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		NAME STREET ADDRESS CITY-ST-ZIP	
TITLE , NAME	Delete	TITLE NAME	Change Addition   1000031336612
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	-02/14/0001003004 ****300.00 ****300.00 }
TITLE - NAME	☐ Delete	TITLE NAME	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	☐ Delele	TITLE NAME	Change Addition
STREET ADDRESS CITY-ST-ZIP	1	STREET ADDRESS CITY-ST-ZIP	5 Payre 2-14-60
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 eport is too 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 tribble 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 a address with all other like empowered.			
SIGNATURE: Lyk Blandon Boyer Jr. 2 11 00 (954) 507-4640  SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Daylone Phone #			



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 8, 2000

Nationwide Battery, Inc. Attn: Mr. Lyle Blandon Boyer, Jr. 3381 SW 11th Ave. Ft. Lauderdale, FL 33315

SUBJECT: NATIONWIDE BATTERY, INC.

Ref. Number: G79484

Per our recent phone conversation, I am forwarding the uniform business report for the years 1999 and 2000 for the subject corporation as this corporation was voluntarily dissolved in error on August 17, 1998. The fee is \$150 for each year a total of \$300. Please return the uniform business report to me in the enclosed self addressed envelope within the next 30 days.

Please accept my apology for this inconvenience.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6901.

Letter Number: 000A00006342

Susan Payne Senior Section Administrator