## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Feb 15, 2001 8:00 am **DOCUMENT # L43547 Secretary of State** 1. Entity Name PHOENIX A.G. INTERNATIONAL CORP. 02-15-2001 90067 035 \*\*\*150.00 Principal Place of Business Mailing Address 335 SAN ROBERTO DRIVE C/O CLIFF BOWDITCH TITUSVILLE FL 32786-7286 26 CHICKASAW CRESCENT KANATA ON KRM- 1R4 2. Principal Place of Business 3. Mailing Address DOWDITAL VONN DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc MIT City & State Applied For 4. FEI Number 59-3073799 A Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired CANADA 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent BOWD ITCH BOWDITCH, C F Street Address (P.O. Box Number is Not Acceptable) 335 SAN ROBERTO DRIVE TITUSVILLE FL 32786-7286 8. The above named entity submits this statement for the purpose of changing its office or registered agent, or both, in the State of Florida Agent signature required when reinstating FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11, 12. ☐ Addition TITLE TITLE ☐ Delete BOWDITCH, CLIFF NAME APPALOOSA DR. 335 SAN ROBERTO DRIVE STREET ADDRESS STREET ADDRESS KANATA, ONTARIO, CANADA CITY-ST-ZIP CITY-ST-ZIP **TITUSVILLE FL 32786-7286** TITLE ☐ Delete TITLE LAHEY, ORVILLE J. C. NAME NAME STREET ADDRESS STREET ADDRESS 12 CAMBRIDGE CT. RR #5 CITY-ST-ZIP CITY-ST-ZIP KEMPTVILLE ON ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 stall 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.

CITY-ST-ZIP

CITY-ST-7IP