LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

08-11-2002 90167 025 ****50.00 **DOCUMENT #** L99000004233 1. Entity Name CENTRAL FLORIDA METALS 97350 DO NOT WRITE IN THIS SPACE 3. Mailing Address 2. Principal Place of Business 1301 Atlanta Ave Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3578496 Not Applicable Orlando, F٦ \$5.00 Additional _Zip____ 5. Certificate of Status Desired 32806 7. Name and Address of Current Registered Agent Ryan E. Wilson Street Address (P.O. Box Number is Not Acceptable) 1301 Atlanta Ave DO NOT WRITE IN THIS SPACE 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 FEE IS \$50.00 Make Check Payable to Department of State DUE BY MAY 1 MANAGING MEMBERS / MANAGERS Managing Member TITLE TITLE Ryan E. Wilson NAME CR2E083B (12/01) NAME 2713 Peggy Drive Kissimme, FL 34744 Managing Member STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME. Micháel J. Wilson NAME 1784 Cheryl Lane Kissimmee, FL 34 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME .. NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE. IN THIS SPACE TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

TITLE

NAME

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or

manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS

CITY-ST-ZIP

FILED

Aug 11, 2002 8:00 am Secretary of State

4076503885

SIGNATURE: Ryan E. Wilson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE STE FL32519F.1

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME