2002 UNIFORM BUSINESS REPORT (UBR)

May 15, 2002 8:00 am Secretary of State M52542 DOCUMENT # 1. Entity Name 05-15-2002 90169 006 ***150.00 MCINNIS AUTO ELECTRIC, INC. Mailing Address Principal Place of Business 6020 NW 25 COURT 1121 NW 31ST AVENUE SUNRISE FL 33313 FT. LAUDERDALE FL 33311 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2824516 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required ⇒-7. Name and Address of New Registered Agent -6: Name and Address of Current Registered Agent WEISS, MARTIN Street Address (P.O. Box Number is Not Acceptable) 20610 SW 90 AVE FORT LAUDERDALE FL 33324 Zip Code City 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) Bet Card FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE VD . NAME MCINNIS, DENZIL NAME STREET ADDRESS 6020 NW 25 COURT STREET ADDRESS CITY-ST-ZIP SUNRISE FL 33313 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME MAYLO, MCINNIS STREET ADDRESS STREET ADDRESS 6020 NW 25 COURT CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL 33313 ☐ Addition Change Delete TITLE TITLE NAME NAME MCINNIS, GOWIN- CONV STREET ADDRESS STREET ADDRESS 6020 NW 25 COURT CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL 33313 Change ★ Addition ☐ Delete TITLE TITLE MCTURIS NEW SETTI NAME NAME 6020 NW 25 Car7 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Swalse FL 32317 CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 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 11 or Block 12 if

MAYLO MEINNIS 25 AOR OZ Daytime Phone #

FILED