FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

## Mar 20, 2001 8:00 am **DOCUMENT # M76010 Secretary of State** 1. Entity Name EASTERN AEROCHEM, INC. 03-20-2001 90039 025 \*\*\*150.00 Principal Place of Business Mailing Address 8822 BAY POINT DRIVE 8822 BAY POINT DRIVE VYVVVIAG F203 TAMPA FL 33615 **TAMPA FL 33615** US 2. Principal Place of Business 3. Mailing Address 3108 ROLLING ACRES PLACE 3108 ROLLING ACRES PLACE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2883339 FL. VALRICO /ALRICO Not Applicable Country US Country \$8.75 Additional 5. Certificate of Status Desired I) S Fee Required -6:∈Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SAME BEARINGER, MARGARET J. Street Address (P.O. Box Number is Not Acceptable) 8822 BAY POINT DR. **TAMPA FL 33615** City VALRICO 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 3/2/01 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Delete BEARINGER, MARGARET J. NAME MARAE 3108 ROLLING ACRES STREET ADDRESS STREET ADDRESS 8822 BAY POINT DR. CITY-ST-ZIP CITY - ST-ZIP TAMPA FL ☐ Delete TITLE TITLE NAME BEARINGER, JOSEPH W. NAME 3108 ROLLING ACRES PLACE STREET ADDRESS STREET ADORESS 8822 BAY POINT DR. VALRICO, FL 33594 CITY-ST-7IP CITY-ST-7IP TAMPA FL Detete -TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition 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

SIGNATURE: BLANTING USEPH W. BEARINGER 3/2/01 (813)654-4886