2002 UNIFORM BUSINESS REPORT (UBR)

May 24, 2002 8:00 am Secretary of State **DOCUMENT #** P00000029967 1. Entity Name 05-24-2002 91271 035 ***150.00 EDRON FIXTURE CORP. Principal Place of Business Mailing Address NO. 1. LEGGET: RD. NO. 1 LEGGET RD. CARTHAGE MO 64836 CARTHAGE MO 64836 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 43-1888026 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION FL 33324 City Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME **GUASTAFESTE, CARMINE E** NAME STREET ADDRESS 9400 NW 104TH ST STREET ADDRESS CITY-ST-ZIP MEDLEY FL 33178 CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME JEFFERIES, ROBERT A JR NAME STREET ADDRESS NO 1 LEGGETT ROAD STREET ADDRESS CITY-ST-ZIP CARTHAGE MO 64836 CITY-ST-ZIP TITLE DVS Delete TITLE ☐ Change ☐ Addition NAME JETT, ERNEST C NAME STREET ADDRESS NO. 1 LEGGET RD. STREET ADDRESS CITY-ST-ZIP CARTHAGE MO 64836 CITY-ST-ZIP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME GLAUBER, MICHAEL A NAME STREET ADDRESS NO 1 LEGGETT ROAD STREET ADDRESS CITY-ST-ZIP CARTHAGE MO 64836 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME PURSER, KENNETH W NAME STREET ADDRESS NO 1 LEGGETT ROAD STREET ADDRESS CITY-ST-ZIP CARTHAGE MO 64836 CITY-ST-ZIP TITI F ☐ Delete TITLE ■ Addition ☐ Change NAME BRADSHAW, SHERI L NAME STREET ADDRESS NO 1 LEGGETT ROAD STREET ADDRESS CITY-ST-ZIP CARTHAGE MO 64836 CITY-ST-ZIP

SIGNATURE:

e empowered

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 rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

FILED