2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 28, 2001 8:00 am DOCUMENT # P00000040085 **Secretary of State** 1. Entity Name MORAVIA STEEL INC. 03-28-2001 90223 020 ***150.00 Principal Place of Business Mailing Address A0038539 2. Principal Place of Business 3. Mailing Address SAME 2510 OAK TRATLS, ADT Suite, Apt. #, etc. APT. #107 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For CLEARWATER, FL Not Applicable 59-3638242 Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Ш 33764 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MICHAEL D. PASEK Street Address (P.O. Box Number is Not Acceptable) 4851 85TH AVE. PINELLAS PARK, FL 33781 City Zip Code 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, OFFICERS AND DIRECTORS 12. Change Addition TITLE ☐ Delete TITLE NAME JAN JANOUSEK STREET ADDRESS STREET ADDRESS 2510 OAK TRAIL S., APT. 107 CITY-ST-ZIP CITY-ST-ZIP CLEARWATER, FL 33764 ☐ Addition ☐ Delete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST- 7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 regarded 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. Jan Janousek PRESIDENT 3/21/01 (727)424~1599 SIGNATURÉ: Daytime Phone # SIGNATURE AND PYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR