FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 02, 2002 8:00 am
Secretary of State
06-05-2002 90412 023 ***550.00

DOCUMENT # P01000037799

1. Entity Name: A&C Bearing Company 201. COR Profit A/R

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2. Principal Place of Business	3. Mailing Address
2705 54TH AVE NO	2705 54TH AVE NO
Suite, Apt. #, etc. Suite #8	Suite, Apt. #, etc. Suite #8
City & State St. Petersburg, FL	City & State St. Petersburg, FL
Zip 33714 Country U.S.A.	Zip 33714 Country U.S.A.

4. FEI Number 59-3713673 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: CHRIS W. MOYER

Street Address (P.O. Box Number is Not Acceptable): 2705 54TH AVE NO UNIT #8

City: ST. Petersburg FL Zip Code: 33714

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: Christopher W. Moyer June 27, 2002
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 Tax filing requirement and elects to do so. (See criteria on back) ☑

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PRESIDENT NAME FRANCES V. MOYER STREET ADDRESS 10401 JOHNSON BLVD J-314 CITY-ST-ZIP SEMINOLE, FL 33772	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE VICE-PRESIDENT NAME CHRISTOPHER W. MOYER STREET ADDRESS 7401 35TH AVE NO CITY-ST-ZIP ST PETE FL 33710	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE SECRETARY NAME Beverly D. Debysingh STREET ADDRESS 1627 Saddle Creek Circle CITY-ST-ZIP Arlington, TX 76015	TITLE NAME STREET ADDRESS CITY-ST-ZIP **DO NOT WRITE IN THIS SPACE**
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Christopher W. Moyer V.P. June 03, 2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #