2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 14, 2002 8:00 am Secretary of State DOCUMENT # P01000060113 1. Entity Name AFI MOTION, INC. 05-14-2002 90052 028 ***150 00 Principal Place of Business Mailing Address 2147 D PORTER LAKE DRIVE 2147 D PORTER LAKE DRIVE SARASOTA FL 34240 SARASOTA FL 34240 2. Principal Place of Business 3. Mailing Address 1951-A Porter Lake Dr. 1951-A Porter Lake Dr. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For <u>Sarasota,</u> Sarasota, 65-1116209 Not Applicable Zip Country \$8.75 Additional 34240 5. Certificate of Status Desired Sarasota 34240 Sarasota Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FELDMAN, MARC H Street Address (P.O. Box Number is Not Acceptable) 3908 26TH STREET WEST **BRADENTON FL 34205** 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 .10. Election Campaign Financing Tax filing requirement and elects to do so. **-\$5.00**:May:Be After May 1, 2002 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITI E XXChange ☐ Addition wooster, Jonathan A NAME STREET ADDRESS 8315 EAGLE CROSSING STREET ADDRESS 1951-A Porter Lake Drive CITY-ST-ZIP SARASOTA FL 34241 CITY-ST-ZIP Sarasota, FL 34240 TITLE ☐ Delete TITLE XX Change ☐ Addition NAME Wooster, Denise L NAME STREET ADDRESS 8315 EAGLE CROSSING STREET ADDRESS 1951-A Porter Lake Dr. CITY-ST-ZIP SARASOTA FL 34241 CITY-ST-ZIP Sarasota, FL 34240 TITLE Delete = आग्रह XX Change --- Addition= NAME wooster, stephen NAME STREET ADDRESS 4308 KINGSTON LOOP STREET ADDRESS 1951-A Porter Lake Dr. CITY-ST-7IP SARASOTA FL 34238 CITY-ST-7IP Sarasota, FL 34240 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F □ Defete TITLE ☐ Change Addition NAME

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

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

tephen H. Wooster