FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 14, 2002 8:00 am Secretary of State

DOCUMENT # P0100019262	05-14-2002 90348 036 ***150.00
KNELLER INDUSTRY, INC.	
DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business Florida/ Wolvsia (4) Suite, Apt. #, etc. 3. Mailing Address 555 Ballough Ro	DO NOT WRITE IN THIS SPACE
Daytona Beach, FZ City & State (SAME)	4. FEI Number Applied For Not Applicable
32114 Volusia Zip Country	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 Doug ks Ne e Street Address (P.O. Box Hymber is Not Acceptable) City Doug ks Not Acceptable) City Doug ks Not Acceptable)	
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 Supplier Mann or Funded name of registered agent and title it applicable. (NOTE. Registered Agent Signature required when reinstating) DATE 120 120 120 120 120 120 120 12	
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 Frust Fund Contribution. Added to Fees 11. OFFICERS AND DIRECTORS	
THE Predictor Secretary, Trusy THE NAME STREET ADDRESS CITY-SI-ZIP DAYTONA BOACL, FT. CITY-SI-ZIP OFFICERS AND DIRECTORS THEE NAME STREET ADD CITY-SI-ZIP CITY-SI-ZIP DAYTONA BOACL, FT. CITY-SI-ZIP	
TITLE NAME STREET ADDRESS 110 100 St. CITY-ST-ZIP Half Hill FZ 33117 TITLE NAME STREET ADD CITY-ST-ZIP	RESS
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TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	rtss
13. Thereby certify that the information supplied with this filling 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 opticistic 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 additional empowered. SIGNATURE: SIGNATU	