FOR PROFIT CORPORATION NIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # PO20000 26775 03 SEP 16 AM 9: 34 The Right Wrench Service Center, Inc DO NOT WRITE IN THIS SPACE Principal Place of Business 3. Mailing Address 5590-77# Av.N. 590-774 Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Pinellas Park, FC Applied For Not Applicable Country Pinellas \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of Current Registered Agent DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 5590-774 Av. N. 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. I am familiar with, and accept the obligations of registered agent 9-12-03 (NOTE: Registered Agent signature required when reinstating January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS TITLE TITLE Ross, Patrick J. 5590-77#Av. N. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Pinellas Park, FL 33781 TITLE TITLE NAME NAME Ross, Sherrie E. STREET ADDRESS STREET ADDRESS 5590-774 Av. N. CITY-ST-ZIP City-St-7iP Pinellas Park, FL 3378) TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE IN THIS SPACE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 10 or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: Octube & Noss P.S. PATRICK J. Ross

9-12-03

(727) 578-0967

CR2E034B (12/02)

Daytime Phone #

The Right Wrench Service Center, Inc.

5590 77th Avenue North ~ Pinellas Park, FL 33781 ~ USA
Phone 727-578-0967 ~ Fax 727-578-0967 ~ Home Phone 727-547-0196 ~ Email pross1@tampabay.rr.com

September 12, 2003

Division of Corporations Annual Report/Uniform Business Report Section P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern,

Enclosed per your request, please find the completed document which has been completed and returned to you within 30 days from the date of your letter, along with a copy of your letter.

Enclosed please also find my original letter of August 3, 2003 along with the original check for \$150.00 which should cover the amount due. Please review my letter of August 3, 2003.

Document # P02000026775.

Sincerely,

Patrick J. Ross, President

Catrick & Ross C.S.

Enc: 4

The Right Wrench Service Center, Inc.



5590 77th Avenue North ♦ Pinellas Park, FL 33781 ♦ USA
Phone 727-578-0967 ♦ Fax 727-578-0967 ♦ Home Phone 727-547-0196 ♦ Email pross1@tampabay.rr.com

August 03, 2003

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahasse, FL 32302-1500

LOUIS BROWN CONTROL

To Whom It May Concern,

Please be advised that I did not receive the first form for the corporation fee. I received your second notice indicating the current fee. However, I do not feel I should owe the second fee amount as I never received the billing for the first fee amount.

Enclosed is a check for \$150.00 which should cover the amount due.

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Document # P02000026775.

Sincerely,

Patrick J. Ross, President

Enc: 1