## Joby FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # P020000 W3310 KKZehr INC. OL APR 28 AM 8: 45 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business
7875 Palmer Blud Mailing Address 7875 Palmer Blud Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 0459375 Applied For Sity & State Citv & State Dairo sotal Fl <u>wasota</u> Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired carasota zaraseta 7. Name and Address of Current Registered Agent DO NOT WRITE IN THIS SPACE 7875 PALMER BLUD City S ARASOTA 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 (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 CR2E034B (12/02) TITLE TITLE " 300034457463 04/28/04--01058--002 \*\*150.00 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-71P TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 fice empowered.

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