APR -28-00(FRI) 12:41

**FILED**
**May 08, 2000 8:00 am**
**Secretary of State**
04-12-2000 90018 004 ***150.00

4/12/01

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P39013

1. Entity Name
AMERICAN EAGLE WHEEL CORPORATION

| Principal Place of Business | Mailing Address |
|---|---|
| 5780 SOESTERN<br>CHINO CA 91710<br>US | 5780 SOESTERN COURT<br>CHINO CA 91710-7020 |

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

4. FEI Number 95-3234558 ☐ Applied For ☐ Not Applicable

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

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| ~~MYRICK, PATRICK K~~ BOB WILL<br>1721 PREMIER ROW<br>ORLANDO FL 32809 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City FL 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.

X SEE FAX ATTACHED Bob Will
SIGNATURE Signature, name or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when changing) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
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 | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | CP ~~EBERSOL, JOHN~~ DAN ELBERSE<br>5780 SOESTERN COURT<br>CHINO CA | ☐ Delete | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | CS<br>TAITE, SYLVIA<br>5780 SOESTERN COURT<br>CHINO CA | ☐ Delete | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>~~EBERSOL, RAY~~<br>5780 SOESTERN COURT<br>CHINO CA | ☐ Delete | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | ☐ Change ☐ Addition |
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| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | ☐ Change ☐ Addition |

CR2E084 (03/99)

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 all other like empowered.

SIGNATURE: [signature] 3/24/00
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED BY CORPORATION OR DIRECTOR Date Daytime Phone #