## 2000 UNIFORM BUSINESS REPORT (UBR)

## Apr 11, 2000 08:00 AM DOCUMENT # P9400065907 1. Entity Name **Secretary of State** QUINLAN MOTORS, INC. Principal Place of Business Mailing Address 15005 US HWY 19 N 110 SE 6TH STREET 20TH FLOOR ET LAUDERDALE CLEARWATER FL FL 33764 33301 2. Principal Place of Business 3. Mailing Address 13600 ICOT BOULEVARD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For CLEARWATER FL 59-3268936 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33760 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM 12000 PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 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. 04/11/2000 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete TITLE XI Change ☐ Addition QUINLAN **JAMES** NAME QUINLAN JAMES G STREET ADDRESS 15299 US HIGHWAY 19 NORTH STREET ADDRESS 13600 ICOT BOULEVARD CITY-ST-ZIP 34624 CLEARWATER 34624 CITY-ST-ZIP CLEARWATER TITLE ☐ Delete TITLE X Change ☐ Addition NAME HYLE KATHLEEN NAME BOURHIS MARC Τ. STREET ADDRESS 110 SE 6TH STREET STREET ACCRESS 110 SE 6TH STREET CITY-ST-ZIF FT LAHDERDALE FI. 33301 CITY-ST-718 FT LAUDERDALE FT. 33301 TITLE ☐ Delete TILE VPSD X Change ☐ Addition NAME COLE JAMES NAME FERRANDO JONATHAN P STREET ADDRESS 110 SE 6TH STREET 110 SE 6TH STREET STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE 33301 CITY-ST-ZIP FT LAUDERDALE 33301 TITLE ☐ Defete TITLE X Change ☐ Addition NAME HAWKINS THOMAS NAME MAROONE MICHAEL STREET ADDRESS 110 SE 6TH STREET STREET ADDRESS 110 SE 6TH STREET CITY-ST-ZIP FT LAUDERDALE FT LAUDERDALE 33301 33301 FL. CITY-ST-ZIP FL. TITLE TITLE ☐ Delete ☐ 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-7IP CITY-ST-7/8

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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.

CIONISTINE. IONATHAND PEDDANDO