2000 UNIFORM BUSINESS REPORT (UBR)

May 01, 2000 08:00 AM DOCUMENT # P9400081161 **Secretary of State** ALAMO INTERNATIONAL SALES, INC. Principal Place of Business Mailing Address 110 SE 6TH ST 110 SE 6TH ST STE 1200 STE 1200 FT LAUDERDALE FT LAUDERDALE FL FL 33301 33335 US 2. Principal Place of Business 3. Mailing Address 200 S. ANDREWS AVE. 200 S. ANDREWS AVENUE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For ET LAUDERDALE FL FT LAUDERDALE FL 65-0547939 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33301 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORP SYSTEMS 1200 S PINE ISLAND RD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 Zip Code FL 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. 05/01/2000 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ΑT N Delete TITLE ☐ Change ☐ Addition SILLS HOWARD NAME STREET ADDRESS 200 S.ANDREWS AVE STREET ADDRESS CITY-ST-ZIP FT.LAUDERDALE 33301 CITY-ST-ZIP TITLE ΑT N Delete TITLE ☐ Change ☐ Addition NAME KATHLEEN HVLE NAME STREET ADDRESS 200 S. ANDREWS STREET ADDRESS CITY-ST-ZIF FT LAHDERDALE FL. 33301 CITY-ST-718 TITLE X Delete TILE VAS ☐ Change ☐ Addition NAME HURST MASON OII NAME STREET ADDRESS 110 SE 6 ST STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE 33301 CITY-ST-ZIP TITLE ☐ Defete TITLE DT X Change ☐ Addition NAME BERRARD STEVEN NAME HYLE KATHLEEN 200 S. ANDREWS AVE. STREET ADDRESS 110 SE 6TH ST STREET ADDRESS FT. LAUDERDALE CITY-ST-ZIP 33301 CITY-ST-ZIP FORT LAUDERDALE FL. 33301 FL. TITLE DVS ☐ Delete TITLE X Change ☐ Addition NAME COLE JAMES O NAME HURST MASON οп 110 SE 6TH ST 200 S. ANDREWS AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33301 FORT LAUDERDALE 33301 CITY-ST-ZIP FLTITLE \mathbf{DV} ☐ Delete DS TITLE Change ☐ Addition NAME HAWKINS THOMAS W. SCHWARTZ HOWARD NAME STREET ADDRESS 110 SE 6TH ST 200 S. ANDREWS AVE. STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FT. LAUDERDALE 33301 CITY-ST-7/2 33301

FILED

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.

IONIATUDE - Howard D Schwortz S 05/0