2002 UNIFORM BUSINESS REPORT (UBR)

May 21, 2002 8:00 am Secretary of State P94000081341 DOCUMENT # 1. Entity Name 05-21-2002 91224 007 ***150.00 CAR HAULERS, INC. Principal Place of Business Mailing Address 10328 US HWY 301S 10328 US HWY 301 S. INT 2 LOT 2 HAMPTON FL 32044 HAMTPON FL 32044 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3282125 Not Applicable \$8,75 Additional Zip Country Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JEWELL, JERRY K Street Address (P.O. Box Number is Not Acceptable) 10328 US HWY 301 S. LOT 2 City Zip Code HAMPTON FL 32044 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME Jewell, Jerry K STREET ADDRESS STREET ADDRESS 10328 US HWY 301 S.,LOT 2 CITY-ST-ZIP CITY-ST-ZIP HAMPTON FL ☐ Change ☐ Addition TITLE Delete NAME JEWELL, DEBROAH A STREET ADDRESS STREET ADDRESS 10328 US HWY 310 S., LOT 2 CITY-ST-ZIP CITY-ST-ZIP HAMTPON FL ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME JEWELL, DEBORAH A STREET ADDRESS STREET ADDRESS 10328 US HWY 301 S., LOT 2 CITY-ST-ZIP CITY-ST-ZIP HAMTPON FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME

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

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

H-28-02 362-468-3510

FILED