## 2001 UNIFORM BUSINESS REPORT (UBR)

CITY-ST-ZIP

SIGNATURE:

## FILED Mar 30, 2001 8:00 am DOCUMENT # P95000001631 Secretary of State 1. Entity Name ROTORS IN MOTION, INC. 03-30-2001 90343 010 \*\*\*150.00 Mailing Address Principal Place of Business 7081 TAFT ST. 7499 PEMBROKE RD PMR 189 HOLLYWOOD FL 33023 HOLLYWOOD FL 33024-3803 US 2. Principal Place of Business 3. Mailing Address P.O. BOX DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0747856 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired US A Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BUTLER ALICE U Street Address (P.O. Box Number is Not Acceptable) ...7081 TAFT ST #189 HOLLYWOOD Ft 33024 PLANTATION entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida ed agent and title if applicat 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, 2001 Fee will be \$550.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition **PSM** Delete TITLE TITI F 180 SW 125th ave BUTLER, ALICE NAME NAME STREET ADDRESS % 7499 PEMBROKE RD ~ STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Delete TITLE TITLE CLARK, DAVID A NAME NAME 180-SW-135TH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL ☐ Addition TITLE ☐ Delete TITLE NAME . NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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.