FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jan 18, 2002 8:00 am Secretary of State P95000054129 DOCUMENT # 1. Entity Name 01-18-2002 90003 041 ***158.75 AMERICAN INDUSTRIAL GENERATOR COMPANY Principal Place of Business Mailing Address 3921 SW 47TH AVE 172 GRANADA AVE 1003 WESTON FL 33326 FORT LAUDERDALE FL 33314 US 2. Principal Place of Business 3. Mailing Address* Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FE! Number City & State Applied For City & State 65-0594144 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BLANKENSHIP, WILLIAM L Street Address (P.O. Box Number is Not Acceptable) 17: GRANADA AVE W STON FL 33326 Zip Code City FI 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 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 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 (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Delete ☐ Change Addition TITLE BLANKENSHIP, WILLIAM L NAME 172 GRANADA AVE STREET ADDRESS STREET ADORESS WESTON FL 33326 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE BLANKENSHIP, ALEIDA M NAME NAME STREET ADDRESS 172 GRANADA AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33326 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME BLANKENSHIP, CHRISTINE V NAME STREET ADDRESS STREET ADDRESS 172 GRANADA AVE CITY-ST-7IP CITY-ST-ZIP WESTON FL 33326 ☐ Change ☐ Addition ☐ Delete TITLE TITLE **BLANKENSHIP, CAROLINE V** NAME NAME 172 GRANADA AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTON FL 33326 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

iam L. Blankership 1/6/01 954-325
PRECTOR Date Date Daytime Phone #