| | | O ALL INST | TRUCTIONS | BEFORE C | OMPLETI | NG THIS FORM. | | |
|--|---|---|---|---|--|---|--|--|
| • | PLICATION FOR STATEMENT | 9 97 | A DEPARTMEN Sandra B. Mor Secretary of S IVISION OF CORPOR | tham tate DI | | RPORATIONS | | |
| DOCUMENT # P95000079447 1. Corporation Name | | | | | 7 OCT 31 | | | |
| | CAN AUTOMOTIVE PI | RODUCTS, | INC. | | | と iii う | | |
| Principal Place of Business Malling | | | ng Address | | | . 14161 - 1611 - 4811 - 6811 - 88111 - 8811 | (8 Suite Britist Britist annu | |
| tampa fl 4503 | | | 7 913 SINING CT PL TAMPA FL 33815 -US | | | STATEWE | 77 | |
| | ddresses are incorrect in any way, line ncipal Office Address, If Applicable | | information and enter o | | 4. Date incorpo | prated or Qualified | The confinered of stilling | |
| Sulte, Apt. | 3. W. Kentuky Uu | Sulte, Apt. # | Sulte, Api. #, etc. | | | To Do Business in Florida 10/13/1995 5. FEI Number Applied For | | |
| City & State | pr Fi | City & State | DA FE | | 59-3338144 Not Applicable 6. | | | |
| 3361 | 4 Country USA | 2ip 33 6 | 14 Country | 4 | <u>l</u> | OF STATUS DESIRED 💢 | or a Certificate of Status | |
| 7. Names and Street Addresses of Each Officer and/or Direct Title(s) 1 2 | | | Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers) | | | City / State / Zip | | |
| D , P | GODBEY, E F JR. | 7913 SINGING COURT PLACE | | | TAMPA FL 33815 | | | |
| D, VP | GODBEY, JUDY A | 7913 SINGING COURT PLACE | | | TAMPA FL 33615 | | | |
| | | | 91 | | | 00023377895 -11/04/9701064021 ****750.00 *****750.00 | | |
| | | | | | 90 | *******8.75 | 7899 1064022 ******8.75 | |
| 8. Name and Address of Current Registered Agent | | | | | 9. Name and Address of New Registered Agent | | | |
| GODBEY, E F JR. 7913 SINGING COURT PLACE TAMPA FL 33815 | | | | Name F. Floy d Solbey Jv Street Address (P.O. Box Number is Not Acceptable) 7913 SINGING G PL Sulte, Apt. #, Etc. | | | | |
| 10. I, being appointed the registered agont of the above period corporation, am familiar with and accept the obligations of Section 607.0505, F.S. | | | | | | | 3361\$ | |
| Signature o Registered | | RIGISTERED AC | GENT MUST SIGN | | | Date 10/28/9 | 7 | |
| | is corporation owes or angible Personal Prop | | | ar Yes 🔯 | No 🗌 | | e for information agible tax.) | |
| this rein owed by | that I am an officer or director or the restatement application, the reason for dy the corporation have been paid and tapplication is true and accurate, and my | issolution has beer he names of Indivk y signature shall he | n eliminated, the corpo duats listed on this forr | rate name satisfies n do not qualify for ict as If made under | the requirements an exemption und roath. | of section 607.0401 or 617.04 ler section 119.07(3)(i), F.S. 1 | 101, F.S., that all fees The Information Indicated 813 354-/075 | |
| • | SIGNAT HE KNO TYPEOUT | PRINTED NAME OF | SIGNING OFFICER OR | DIRECTOR | , | Date Da | sytime Phone # | |