FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$1 May 13 1998 8:00am **PROFIT** FLORIDA DEPARTMEN F STATE **CORPORATION** Sandra B. Mor **ANNUAL REPORT** Secretary of State Secretary of St 1998 DIVISION OF CORPO TIONS DOCUMENT # P96000050447 (7) MOR-LITE OF NORTH AMERICA, INC. Principal Place of Business Mailing Address 7207-A 114TH AVENUE NORTH 503 BARNES DR LARGO FL 34643 BRANDON FL 33511 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/12/1996 2. Principal Place of Business 2a. Mailing Address Applied For BARNES 7168 12300 NIBOUE N 503 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State CRANDON City & State \$5.00 May Be Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country Zip This corporation owes or has paid the current year Intangible 33511 us USA □ No 24 25 29 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ALVAREZ, JOSE A **503 BARNES DRIVE** 62 Street Address (P.O. Box Number is Not Acceptable) BRANDON FL 33511 83 City Zip Code F 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE CEOD 1.1 TITLE ALVAREZ, JOSE A NAME 1.2 NAME **503 BARNES DRIVE** STREET ADDRESS 1.3 STREET ADDRESS **BRANDON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change __ Addition 2.1 TITLE TITLE DANIEL, PENA S SR NAME 2.2 NAME 575 ESPLANADE AVE STE 301 **503 BARNES DRIVE** STREET ADDRESS 2 3 STREET ADDRESS PALDS VERDE CA CITY-ST-ZIP 2. 4 CITY - ST - ZIP REDON DO BEACH DELETE Change Addition SD TITLE 3.1 TITLE ALVAREZ, STEVEN M 3.2 NAME NAME 503 BARNES DR STREET ADDRESS 3.3 STREET ADDRESS **BRANDON FL** CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TiTLE Change Addition ELTON GUEFEY R 4. 2 NAME NAME 2840 W.BAY DRIVE A-360 STREET ADDRESS 4.3 STREET ADDRESS BELLEAIR BLUFFS FL CITY-ST-ZIP 4.4 CITY - ST - ZIP Addition DELETE 5.1 TITLE TITLE ALVAREZ, KEVIN J. 5.2 NAME NAME 503 BARNES DR STREET ADDRESS 5.3 STREET ADDRESS

CITY-ST-ZIP 14. Thereby 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 annual report or suppliemental annual 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 recoiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or principle in the property of the corporation o

5.4 CITY - S1 - ZIP

6.3 STREET ADDRESS

6.4 CHY - ST - 7IP

6.1 TiTL€

6.2 NAME

DELETE

BRANDON FL

33511

Change

Addition

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME