FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000020782

1. Corporation Name ZERO AUTOMOTIVE, INC.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90281 034 ***150.00



Principal P ace of Business Mailing Address 7410 GROVER LANE 7410 GROVER LANE LAND O LAKES FL 34639 LAND O LAKES FL 34639 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/31/1997 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3426925 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required-27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Zip Country Zip Country 8. This corporation owes the current year Intangible ĴNo ☐ Yes 30 Personal Property Tax. 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MOORE, FRED S SR. Street Address (P.O. Box Number is Not Acceptable) 7410 GROVER LANE LAND O LAKES FL 34639 83 Zip Code 84 City 85 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 approintment as registered agent. I am familiar with, and a cept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed nome of registered agent and title if applicable (NOT E: Registered Agent signature req iired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition □ DELETE 11 TITLE TITLE MOORE, FRED A SR 12 NAME NAME 7410 GROVER LANE 1.3 STREET ADDRESS STREET ADDRESS LAND O LAKES FL 34639 1 4 CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE 2.1 TITLE ☐ Change TITLE MOORE, WANDA F SR 2.2 NAME NAME 2.3 STREET ADDRESS 7410 GROVER LANE STREET ADORESS LAND O LAKES FL 34639 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4, CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 4 1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 5.1 TITLE TITLE

6.4 CITY-ST-ZIP CITY-ST-ZIP I herety 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 supplemental 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 receiver 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 changes, for on an attachment with an address, with all other like empowered. 14. I hereby certify that the information

52 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

Change

☐ Addition

CR2E034 (11/98)