## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 18, 2002 8:00 am Secretary of State P97000056549 DOCUMENT # 1. Entity Name 04-18-2002 90430 037 \*\*\*150.00 INTEGRITY MACHINE, INC. Principal Place of Business Mailing Address 520 W INTERNATIONAL SPEEDWAY BLVD 520 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3459965 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DANIELS, STEWART A Street Address (P.O. Box Number is Not Acceptable) 520 W. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH FL 32114 City Zip Code 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 Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Change Addition ☐ Delete TITLE TITLE DANIELS, STEWART NAME NAME 520 W INT'L SPEEDWAY BLVD STREET ADDRESS STREET ADDRESS DAYTONA BCH FL 32114 CITY-ST-7IP CITY-ST-ZIP VPD ☐ Addition ☐ Change TITLE ☐ Delete TITLE PRUNER, MARK NAME NAME 520 W INT'L SPEEDWAY BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAYTONA BCH FL 32114 CITY-ST-ZIP - - E Change - 🗶 Addition TITLE~ TITLE . Peter Green wood 145 N. Halifax #511 Daytona Beach Fl 32118 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 ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition 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 inclicated 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 received 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 attachmen with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

CR2E034 (9/01