## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT Apr 08 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 P97000082016 (1) DOCUMENT # DUAL MOTORS, INC. Principal Place of Business Mailing Address 500 BAY #14 FARMERS MARKET RD 500 BAY #14 FARMERS MARKET RD FT PIERCE FL 34982 FT PIERCE FL 34982 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 2a. Mailing Address 09/22/1997 2. Principal Place of Business 4. FEI Number Applied For WAGNER PI wagner Pl 21 65-0781741 26 Not Applicable Suite, Apt. #, etc. Suite, Ap1. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 BARBEAU, DIANE E 500 BAY #14 FARMERS MARKET RD Street Address (PQ 82 FT PIERCE FL 34982 63 PIERC 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 registere 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 11 TITLE Change .... Addition Barbeau. Diane e NAME 1.2 NAME WAGNER PLACE 500 BAY #14 FARMERS MARKET RD STREET ADDRESS 1.3 S REET ADDRESS FT PIERCE FL 34982 COY-ST-7IP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition NAME Barbeau, Edwin D Sr 2.2 NAME WAGNER PLACE 500 BAY #14 FARMERS MARKET RD STREET ADDRESS 2.3 STREET ADDRESS FT PIERCE FL 34982 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition

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 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 charged, or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.2 NAME

NAME

STREET ADORESS

CITY-ST-ZIP