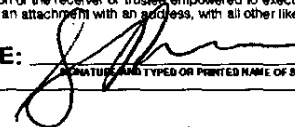


FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91906 029 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

80112572

DOCUMENT # P98000042556					
1. Entity Name NALTRON SOUTH CORP.					
Principal Place of Business 5401 W. KENNEDY BLVD., STE. 1060 TAMPA, FL 33609		Mailing Address 5401 W. KENNEDY BLVD., STE. 1060 TAMPA, FL 33609			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3519309	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
NALLS, STEVE 5401 W. KENNEDY BLVD., STE. 1060 TAMPA, FL 33609				Name Street Address (P.O. Box Number is Not Acceptable) City FL 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when requesting)					
DATE _____					
9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
	D	FLEMING, ALAN	416 RIO VILLA BLVD INDIALANTIC, FL 32903	☐ Delete	
	D	NALLS, STEVE	5401 W. KENNEDY BLVD., STE. 1060 TAMPA, FL 33609	☐ Change ☐ Addition	
	D	REYES, OSCAR	13201 SW 30 CT DAVIE, FL 33328	☐ Change ☐ Addition	
				☐ Change ☐ Addition	
				☐ Change ☐ Addition	
				☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated 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 receiver or trustee, empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  Steven P. Nalls 4-29-03 813287-1433					