2001 UNIFORM BUSINESS REPORT (UBR)

May 23, 2001 8:00 am secretary of State DOCUMENT # P98000083265 1. Entity Name 05-23-2001 90233 035 ***150.00 PALMER'S AUTOMOTIVE, INC. Principal Place of Business Mailing Address 630 NORTHLAKE BLVD. 4328 HUNTING TR. 552715 LAKE PARK FL 33408 LAKE WORTH FL 33467 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number. 65-0875008 Not Applicable Zip Zip Country 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 PALMER, RICHARD Street Address (P.O. Box Number is Not Acceptable) 4328 HUNTING TRAIL LAKE WORTH FL 33467 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. (NOT Registered Agent signature required when reinstating) DATE FILE NOW !! FEE IS \$150.00 9. This corporation is eliqible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 20 11 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payal le to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Delete Change ☐ Addition TITLE TITLE PALMER, RICHARD NAME STREET ADDRESS STREET ADDRESS 4328 HUNTING TR. CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33467 TITLE VPD ☐ Delete Change Addition NAME PALMER, MARLENE NAME STREET ADDRESS 4328 HUNTING TR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33467 TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE

changed, or on an attachment with an address, with all

STREET ADDRESS

CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify fc. the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that the signature shall have the same legal effect as if made under eath; 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 11 or Block 12 if

FILED

CR2E034 (10/00)

SIGNATURE: 1

NAME

STREET ADDRESS

CITY-ST-ZIP