

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 24, 2000 08:00 AM
Secretary of State

DOCUMENT # P99000078360

1. Entity Name
 D/L MOTOR-HO, INC.

Principal Place of Business 17275 U.S. HWY. 19 NORTH CLEARWATER FL 33764	Mailing Address 110 S.E. 6TH ST., 20TH FLOOR FT. LAUDERDALE FL 33301
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2. Principal Place of Business 110 SE SIXTH STREET, 20TH FLOOR	3. Mailing Address 110 SE SIXTH STREET, 20TH FLOOR
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State FT LAUDERDALE FL	City & State FT. LAUDERDALE FL	4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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Zip 33301	Country US	Zip 33301	Country US	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324			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.

SIGNATURE _____ (NOTE Registered Agent signature required when reinstating)
 Signature, typed or printed name of registered agent and title if applicable

04/24/2000
DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JONATHAN P. FERRANDO

04/24/2000