FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 18, 2001 8:00 am Secretary of State **DOCUMENT # S32114** MORGAN TIRE & AUTO, INC. 05-18-2001 91686 001 ***750 00 Principal Place of Business Mailing Address 2021 SUNNYDALÉ BLVD. 2021 SUNNYDALE BLVD. 14011 CLEARWATER FL 33765 CLEARWATER FL 33765 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 59-3049617 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 EAST PARK AVENUE TALLAHASSEE FL 32301 Zip Code City FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. OFFICERS AND DIRECTORS Enginery Morson Lurry & Morson dition Delete TITLE TITLE MORGAN, LARRY C. NAME NAM5 2021 SUNNYDALE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Cleanater FL 33765 **CLEARWATER FL 33765** CITY-ST-ZIP Tressier ☐ Change **★** Addition ☐ Delete TITLE TITLE SLATTERY, KEVIN NAME NAME 15-noxchile B 2021 SUNNYDALE BLVD STREET ADDRESS STREET ADDRESS **CLEARWATER FL 33765** CITY-ST-7IP CITY-ST-ZIP Secretary Director III Change & N. Thompson Their III Addition TITLE Delete MORGAN, PATRICIA B. NAME NAME 2021 SUNNYDALE BLVD. STREET ADDRESS STREET ADDRESS **CLEARWATER FL 33765** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE ■ Addition TITLE huichi Ishi Eshi NAME 50 Century Ald STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ★ Addition NAME 50 west bulf Read 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 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

SIGNATURE: 🚣 SIGNATURE AND TYPED OR KEINFED NAME OF SIGNING OF

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

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Addition Addition