FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S36712** **(5)**

1. Corporation Name

EXPRESS AUTOMOTIVE MACHINE, INC.

Principal Place of Business	Mailing Address
1611 N GARFIELD AVE DELAND FL 32724	1611 N GARFIELD AVE DELAND FL 32724

3. Date Incorporated or Qualified: **03/11/1991**

3a. Date of Last Report: **07/24/1995**

4. FEI Number: **59-3054238** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22 1355 Saratoga St	Suite, Apt. #, etc. 27 1355 Saratoga St
City & State 23 DeLand, Fla.	City & State 28 DeLand, Fla.
Zip / Country 24 32724 / 25 USA	Zip / Country 29 32724 / 30 USA

9. Name and Address of Current Registered Agent

KAESERMAN, A. JOHN JR
1611 N GARFIELD AVE
DELAND FL 32724

10. Name and Address of New Registered Agent

81 Name: Kurt R. Borglum P.A.
82 Street Address (P.O. Box Number is Not Acceptable): 366 E. Graves Ave Suite B
83
84 City: Orange City FL 85 Zip Code: 32763

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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: Kurt R. Borglum Pres — DATE: 5-1-96

(Signature, type or print name of registered agent, and title if applicable. Agent's signature required when filing.)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BAKER, BRUCE M.		1.2 NAME		
STREET ADDRESS	2156 LAKE HIRES RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	DELEON SPRINGS FL		1.4 CITY, ST, ZIP		
TITLE	STD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	KAESERMAN, A. JOHN JR		2.2 NAME		
STREET ADDRESS	1424 E HOWRY AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	DELAND FL		2.4 CITY, ST, ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME	300001818163	
STREET ADDRESS			3.3 STREET ADDRESS	-05/13/96--01028--023	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	***200.00	
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		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY, ST, ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY, ST, ZIP		

5-1-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 changed, or on an attachment with an address.

SIGNATURE: Bruce Baker President — 2-12-96 — (904)734-9302

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

Bruce Baker President

CR2E034 (12/95)