

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90214 034 ***150.00

DOCUMENT # S46734

1. Entity Name

AYMAT POWER SPORTS, INC.

Principal Place of Business

**12101 ASHTON MANOR WAY
 #304
 ORLANDO FL 32828**

Mailing Address

**12101 ASHTON MANOR WAY
 #304
 ORLANDO FL 32828**

2. Principal Place of Business

624 HARDWOOD CIRCLE

3. Mailing Address

624 HARDWOOD CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO, FL

City & State

ORLANDO, FL

4. FEI Number

65-0309380

Applied For

Not Applicable

Zip

32828

Country

U.S.A.

Zip

32828

Country

U.S.A.

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MCLEAN, CAROL
 140 ROYAL PALM WAY
 SUITE 206
 PALM BEACH FL 33480**

7. Name and Address of New Registered Agent

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 *Noel M. Syntz*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/26/01

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ Delete
 NAME **AYMAT, NOEL**
 STREET ADDRESS **12101 ASHTON MANOR WAY, #304**
 CITY-ST-ZIP **ORLANDO FL 32828**

TITLE **VSD** ☐ Delete
 NAME **PECKHAM, SHERRIE**
 STREET ADDRESS **12101 ASHTON MANOR WAY, #304**
 CITY-ST-ZIP **ORLANDO FL 32828**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **624 HARDWOOD CIRCLE**
 CITY-ST-ZIP **ORLANDO, FL 32828**

TITLE ☒ Change ☐ Addition
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 STREET ADDRESS **624 HARDWOOD CIRCLE**
 CITY-ST-ZIP **ORLANDO, FL 32828**

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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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.

SIGNATURE: *Noel M. Syntz*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/01

Date

407-736-6899

Daytime Phone #

CR2034 (10/00)