FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Apr 02 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # E. & E. MOTORS, INC. Principal Place of Business Mailing Address 4208 FOWLER ST 4208 FOWLER ST FT MYERS FL 33901 FT. MYERS FL 33901 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/23/1992 2. Principal Place of Business 4. FEI Number Applied For 1360 Melaleura La 65-0311253 Not Applicable 26 \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes Yes 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ZARICK, EDWARD T. JR. 1360 MELALEUCA LANE Street Address (P.O. Box Number is Not Acceptable) FT. MYERS FL 33901 City 85 Zip Code Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Signature, typed or pented name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition Change TITLE 1.1 TITLE DOJCSAK, ENDRE 1.2 NAME NAME 152 S.E. 21ST ST. STREET ADDRESS 1.3 STREET ADDRESS CAPE CORAL FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE NAME ZARICK, EDWARD T. JR. 2.2 NAME STREET ADDRESS 1360 MELALEUCA LANE 2.3 STREET ADDRESS FT. MYERS FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ■ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP ___ Change Addition DELETE 6.1 TITLE TITLE NAME 6.2 NAME STREET ADORESS **6.3 STREET ADDRESS**

14. Thereby 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 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 of 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 examinent with an address.

6.4 CITY-ST-ZIP

7.20.98

941,225.5576