2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with

SIGNATURÉ

## Mar 11, 2004 08:00 AM DOCUMENT # V43802 **Secretary of State** 1. Entity Name VOLVOSTOP, INC. Mailing Address Principal Place of Business 557 NE 26 COURT POMPANO BEACH FL 33064 557 NE 26 COURT POMPANO BEACH FL 33064 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) MOORE 4. FEI Number Applied For City & State City & State 65-0350363 Not Applicable Zφ Zio Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BURTON, LEON Street Address (P.O. Box Number is Not Acceptable) 557 NORTHEAST 26TH COURT POMPANO BEACH FL 33064 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and riffe if applicable. (NOTE Registered Agent signature required whon roinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. Change ☐ Addition TITLE 0 ☐ Detete BILE BURTON, LEON NAME Ungnon084354 NAME STREET ADDRESS 03/11/04-80003-003 150.00 STREET ADDRESS 557 N.E. 26TH COURT CITY - ST - ZIP POMPANO BEACH FL 33064 CITY - ST - ZIP Change Addition COO TITLE ☐ Delete TETLE BURTON, GLORIA NAME MARKE STREET ADDRESS 557 N.E. 26TH COURT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33064 CHY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CATY-ST-7/P Delete THEE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHTY-ST-ZIP Defete TITLE ☐ Chance Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CATY-ST-ZIP Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 suppliemental 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 feetiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attaghment with an address, with all other like empowered.

**FILED**