

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90007 027 ***150.00

DOCUMENT # L28269

1. Entity Name
UNITED AUTOMOTIVE CORP.

Principal Place of Business 3650 NORTH 36TH AVE 64 HOLLYWOOD FL 33021 US	Mailing Address 3650 NORTH 36TH AVE 64 HOLLYWOOD FL 33021 US
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2. Principal Place of Business UNITED AUTOMOTIVE CORP. 2802 N. 46 AVE. - #B519 HOLLYWOOD, FL 33021	3. Mailing Address UNITED AUTOMOTIVE CORP. 2802 N. 46 AVE. - #B519 HOLLYWOOD, FL 33021
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DO NOT WRITE IN THIS SPACE

City & State	City & State	4. FEI Number 65-0162710	Applied For Not Applicable
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	

**ISRAEL, STANLEY E.
 450 N PARK RD
 SUITE 805
 HOLLYWOOD FL 33021**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **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		12. ADDITIONAL REGISTERED DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NATHAN, JOEL JOSEPH 3650 N 36TH AVE STE 24 HOLLYWOOD FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mr. & Mrs. Joseph Nathan 2802 N. 46th Ave. #B519 Hollywood, FL 33021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NATHAN, WENDY 3650 NORTH 36TH AVE, #64 HOLLYWOOD FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mr. & Mrs. Joseph Nathan 2802 N. 46th Ave. #B519 Hollywood, FL 33021
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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: JOEL JOSEPH NATHAN Date 4-16-01 Daytime Phone # 954 894 9464

CRE034 (10/00)