2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State
05-14-2001 90178 006 ****61.25

DOCUMENT # N30591 ✓

1. Entity Name
Southeast Florida Chrysler - Plymouth, DAA

A00064895

Principal Place of Business	Mailing Address
OC Taylor Motors c/o Art Taylor 700 N. Federal Hwy Delray Bch, FL 33444	Santini & Company, PA 1776 N. Pine Island Rd #315 Plantation, FL 33322

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0086014 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

Kaye, Martin
Dadeland Jeep Eagle
15895 S. Dixie Hwy
Miami, FL 33062

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Kaye, Martin 15895 S. Dixie Hwy Miami, FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Kaye, Martin ← Same	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Fioravante, Gene 16660 NW 57 Ave Miami FL 33014	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Fioravante, Gene ← Same	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Planas, Carlos 8250 SW 8th St Miami FL 33144	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	←	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Art Taylor 700 N. Federal Hwy Delray Bch, FL 33444	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Art Taylor ←	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD Campana Jay 855 S. US Hwy 1 Vero Bch, FL 32962	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	←	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/00)

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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Vice Pres 4-26-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #