SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUL -6 AM 8:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P93000049178 (5)

1. Corporation Name

UPTOWN AUTO BROKERS, INC.

Principal Place of Business	Mailing Address
414 S. ORANGE BLOSSOM TRAIL ORLANDO FL 32803	1805 EAST WOODWARD ST. ORLANDO FL 32803

3. Date Incorporated or Qualified	07/07/1993
3a. Date of Last Report	08/30/1994
4. FEI Number	59-3192083
Applied For	
Not Applicable	
5. Certificate of Status Desired	☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address		
21	26 P.O. BOX 532044		
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.		
23 City & State	28 City & State Orlando		
24	25	29 Zip FL	30 Country 32853

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WOMACK, DOYLE 414 S. ORANGE BLOSSOM TRAIL ORLANDO FL 32803	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City FL 85 Zip Code

11. [illegible] 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 [illegible] the obligations of Section 607.0505, Florida Statutes.

[illegible] NOTE: Registered Agent signature required when amending (DATE)

12. OFFICERS AND DIRECTORS	13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS
PD WOMACK, DOYLE 414 S. ORANGE BLOSSOM TRAIL ORLANDO FL 32803	1 TITLE ☐ Change ☐ Addition 1 NAME 1 STREET ADDRESS 1 CITY ST ZIP
	2 TITLE ☐ Change ☐ Addition 2 NAME 2 STREET ADDRESS 2 CITY ST ZIP
	3 TITLE ☐ Change ☐ Addition 3 NAME 3 STREET ADDRESS 3 CITY ST ZIP
	4 TITLE ☐ Change ☐ Addition 4 NAME 4 STREET ADDRESS 4 CITY ST ZIP
	5 TITLE ☐ Change ☐ Addition 5 NAME 5 STREET ADDRESS 5 CITY ST ZIP
	6 TITLE ☐ Change ☐ Addition 6 NAME 6 STREET ADDRESS 6 CITY ST ZIP

14. [illegible] that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further [illegible] the annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under [illegible] of the corporation or the [illegible] to execute this report as required by Chapter 607, Florida Statutes, and that my name [illegible] attachment with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/95)

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