

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90232 010 ***150.00

DOCUMENT # P95000093992

1. Entity Name

CAR PLAZA, INC.

Principal Place of Business

Mailing Address

**8360 W. OAKLAND PARK BLVD. #201
 SUNRISE FL 33351**

**8360 W. OAKLAND PARK BLVD. #201
 SUNRISE FL 33351-7338**

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

65-0624302

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ARIE MREJEN, P.A.
 701 W CYPRESS CREEK RD
 SUITE 302
 FT LAUDERDALE FL 33309**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(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. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2000 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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|----------------------------|--|---|---|
| TITLE | DP <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | KADOCH, DAVID | NAME | |
| STREET ADDRESS | 8360 W. OAKLAND PARK BLVD. #201 | STREET ADDRESS | |
| CITY-ST-ZIP | SUNRISE FL | CITY-ST-ZIP | |
| TITLE | DT <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | ZOUR, ISRAEL | NAME | |
| STREET ADDRESS | 12700 BISCAYNE BLVD SUITE 202 | STREET ADDRESS | |
| CITY-ST-ZIP | NORTH MIAMI FL | CITY-ST-ZIP | |
| TITLE | S <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | TIROSH, ZIU | NAME | |
| STREET ADDRESS | 210 174TH ST | STREET ADDRESS | |
| CITY-ST-ZIP | N. MIAMI BEACH FL 33180 | CITY-ST-ZIP | |
| TITLE | D <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FORESTER, BRUCE | NAME | |
| STREET ADDRESS | 4045 SHERIDAN AVE, #432 | STREET ADDRESS | |
| CITY-ST-ZIP | MIAMI BEACH FL | CITY-ST-ZIP | |
| TITLE | D <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | TIROSH, PETER | NAME | |
| STREET ADDRESS | 210 174TH ST | STREET ADDRESS | |
| CITY-ST-ZIP | N. MIAMI BEACH FL 33180 | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ISRAEL ZOUR DT

Date

Daytime Phone #

4/28/00 (954) 749-2030

FILED 05-15-2000