

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92211 016 ***150.00

0366012 AV

DOCUMENT # P96000072489

1. Entity Name
OAKLAND CAR SERVICE, INC.



Principal Place of Business
4839 SW 148 AVE
518
FORT LAUDERDALE FL 33330

Mailing Address
4839 SW 148 AVE
518
FORT LAUDERDALE FL 33330

11041985



2. Principal Place of Business

4839 SW 148 AVE

3. Mailing Address

4839 SW 148 AVE

Suite, Apt. #, etc.

518

Suite, Apt. #, etc.

518

City & State

DAVIE

FL

City & State

DAVIE

FL

Zip

33330

Country

Broward

Zip

33330

Country

Broward

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-0710374

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ATASH, NISSIM

7400 W. OAKLAND PARK BLVD., #1531

LAUDERHILL FL 33319

7. Name and Address of New Registered Agent

Name **ATASH NISSIM**

Street Address (P.O. Box Number is Not Acceptable)

5500 Hancock road

City

S.W. Ranches

FL

Zip Code

33330

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Atash Nissim

4-28-03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD ELKIN, MARCEL 4839 SW 148 AVE-518 FORT LAUDERDALE FL 33330	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ELKIN, ILANA 4839 SW 148 AVE-518 FORT LAUDERDALE FL 33330	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD-VP Nissim Atash 5500 Hancock Road S.W. Ranches FL 33330	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD-VP Nissim Atash 5500 Hancock road S.W. Ranches FL 33330	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, 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:

SIGNATURE **Atash Nissim**

4-28-03 (954)680 3116

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)