2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000047310

D & G AUTOMOTIVE, INC.

\checkmark	

Principal Place of Business	Mailing Address			
641 W. 15TH ST. PANAMA CITY FL 32401	4060 S. FERDON BLVD. CRESTVIEW FL 32536			
2. Principal Place of Business	3. Mailing Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			

FILED Aug 24, 2000 8:00 am Secretary of State

08-24-2000 90033 013 ***558.75

10071265

·											
Principal Place of Business 3. Mailing Address											
Suite, Apt. #	*, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State		City & State		4. FEI Number 59-3512722				oplied For ot Applicable	1		
Zip	Country	Zip Coun		try	5. (Certificate of Status Desired		8.75 Add			
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
				Name							
DAGGS, LEON JR 4060 S. FERDON BLVD. CRESTVIEW FL 32536				Street Address (P.O. Box Number is Not Acceptable)							
				City			FL	Zip Cod	е	1	
SIGNATURE	named entity submits this statement for signature, typed or printed name of registered agent a ration is eligible to satisfy its Intangible equirement and elects to do so.	nd title if applicable. (NO FILE NOW After SEPTEMBER	TE: Registere	d Agent signature requ IS \$550.00 Min. will be \$7	750.00		DATE		May Be	_	
(See criteri	a on back)	Make Check Paya	ble to De	epartment of S						}	
11.	OFFICERS AND I	DIRECTORS	12.		AD	DITIONS/CHANGES TO OFFIC	CERS AND D	IRECTOR:	S IN 11	_ إ	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAGGS, LEON JR 4060 S. FERDON BLVD. CRESTVIEW FL 32536	☐ Delete						☐ Change	Addition	00004 /5/00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD GREER, BRAXTON 2930 ROXBURGH DR. ROSWELL GA 30076	☐ Delete		1			<u>-</u>	Change	Addition	7	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	NAM Stre	E	-	· .	, I	☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Change	☐ Addition		
NAME STREET ADDRESS C/TY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Delete		l l	•			☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-SI-ZIP 13. I hereby co	ertify that the information supplied with	☐ Delete this filing does not qualify fo	CITY	E ET ADDRESS -ST-ZIP	Section	119.07(3)(i), Florida Statutes. I		Change	☐ Addition	7	

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, and all other like empowered.

SIGNATURE: