

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90052 006 ***150.00

DOCUMENT # S55720

1. Entity Name
A & J MOTORS, INC.

Principal Place of Business
A&J MOTORS INC.
331 NE 33RD AVENUE, SUITE B
GAINESVILLE FL 32609
US

Mailing Address
A&J MOTORS INC.
331 NE 33RD AVENUE, SUITE B
GAINESVILLE FL 32609
US

2. Principal Place of Business
P O Box 1759
 Suite, Apt. #, etc.

3. Mailing Address
P O Box 1759
 Suite, Apt. #, etc.

City & State
Melrose, FL

City & State
Melrose, FL

Zip Country
32666 US

Zip Country
32666 US

4. FEI Number **59-3098635**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MONTANE, ALAN E.
331-B NE 33RD AVENUE 147 SE 5th Ave
GAINESVILLE FL 32601 Melrose, FL 32666

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 *Alan E. Montane*

DATE **3-13-2001**

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, 2001 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

TITLE **PD** Delete
 NAME **MONTANE, ALAN E.**
 STREET ADDRESS **331-B NE 33RD AVENUE**
 CITY-ST-ZIP **GAINESVILLE FL**

TITLE **PD** Change Addition
 NAME **Montane, Alan E**
 STREET ADDRESS **147 SE 5th Ave**
 CITY-ST-ZIP **Melrose, FL 32666**

TITLE **STD** Delete
 NAME **MONTANE, ALAN E.**
 STREET ADDRESS **331-B NE 33RD AVENUE**
 CITY-ST-ZIP **GAINESVILLE FL**

TITLE **STD** Change Addition
 NAME **Montane, Alan E**
 STREET ADDRESS **147 SE 5th Ave**
 CITY-ST-ZIP **Melrose, FL 32666**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
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TITLE Change Addition
 NAME
 STREET ADDRESS
 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: *Alan E. Montane*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **3-13-2001** DAYTIME PHONE #

CR2E034 (10/00)