

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000070713

1. Entity Name

TOLEDO AUTOMOTIVE, INC.

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90067 033 ***150.00

Principal Place of Business

1765 WEST 32 PLACE
HIALEAH FL 33012
US

Mailing Address

1765 WEST 32 PLACE
HIALEAH FL 33012
US

2. Principal Place of Business

X **TOLEDO AUTOMOTIVE INC**
Suite, Apt. #, etc. **3655 W 16 AVE**
3+4
City & State **HIALEAH, FL**
Zip **33012** Country **DADE**

3. Mailing Address

X **3655 W 16 AVE**
Suite, Apt. #, etc. **# 3+4**
City & State **HIALEAH, FL**
Zip **33012** Country **DADE**



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0608547

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TOLEDO, ENRIQUE
7945 INDIGO STREET
MIRAMAR FL 33023

7. Name and Address of New Registered Agent

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

ENRIQUE Toledo Pres. 4-25-01

(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

TITLE **PD** ☐ Delete
NAME **TOLEDO, ENRIQUE**
STREET ADDRESS **1765 WEST 32 PLACE**
CITY-ST-ZIP **HIALEAH FL 33012**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

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

Date

Daytime Phone #

ENRIQUE Toledo Pres 4-25-01 305-820-3004

CR2E034 (10/00)