

APPROVED
AND
FILED

03 JUL 15 PM 8:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P96000094911**

1. Entity Name

ST. NICHOLAS AUTO BROKERS, INC.



Principal Place of Business
**6424 ARLINGTON EXPRESSWAY
JACKSONVILLE FL 32211
US**

Mailing Address
**5579 OLIVER STREET
JACKSONVILLE FL 32211
US**



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 **59-3400948**

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

**MAXWELL, ANDREW J III
5579 OLIVER STREET
JACKSONVILLE FL 32211**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(Signature, typed or printed name of registered agent and title is acceptable)

(NOTE: Registered agent signature required when renewing)

DATE

FILE NOW!!! FEE IS \$350.00

After September 10, 2003 Fee will be \$750.00

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	

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 lines empowered.

SIGNATURE:

SIGNATURE REQUIRED

(Signature and typed or printed name of officer or director)

8/3/03 (24) 724-2600

(Typed Name)

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Terence N. Thurson Inc.
Full Service Accounting Firm
8716 Lem Turner Road
Jacksonville, Florida 32208

Tele 904-764-7717
Fax 904-766-7608

Baymeadows Location:
9838 Old Baymeadows Road Suite 382
Jacksonville, Florida 32256

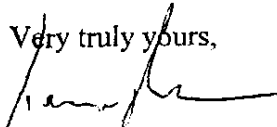
July 12, 2003

Division of Corporations
P. O. Box 1500
Tallahassee, Florida 32302-1500

Reference: P96000094911
St Nicholas Auto Brokers Inc
6424 Arlington Expressway
Jacksonville, Fl 32211

The above corporation has always paid its annual report fee on time. It mail its annual report in March of 2003. For some reason the state did not receive the report. The corporate officer call the reinstatement fee and they told him to send in another report with the 150.00 and attach a letter and everything would be fine. He receive another letter dated July 8, 2003 that he owed a penalty of 400.00 dollars. Please waive the 400.00 dollar penalty since the first mailing was misplaced in the mail and the corporation in the past as always filed on time. Your cooperation will be greatly appreciated.

Very truly yours,


Terence N. Thurson