

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90085 011 ***150.00

DOCUMENT # 389559

1. Entity Name
AUTO BODY SPECIALISTS, INC.

Principal Place of Business
6503 N ORANGE BLOSSOM TRAIL
ORLANDO FL 32810

Mailing Address
6503 N ORANGE BLOSSOM TRAIL
ORLANDO FL 32810

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1361428**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FREIN, JAMES P
5700 GULF STREAM STREET
TAVARES FL 32778

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, 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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **FREIN, JAMES P**
STREET ADDRESS **5700 GULF STREAM STREET**
CITY-ST-ZIP **TAVARES FL 32778**

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

TITLE **S** ☐ Delete
NAME **FREIN, JUDITH**
STREET ADDRESS **5700 GULF STREAM STREET**
CITY-ST-ZIP **TAVARES FL 32778**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: *Judith E. Frein, Secy.* **Judith E. Frein, Secy.** **1/22/02** **407-290-2316**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment
389559

418585

JANUARY 31, 2002

NOTICE TO FLORIDA STOCKHOLDERS

IN ACCORDANCE WITH THE REQUIREMENTS OF THE FLORIDA INTANGIBLE
TAX LAWS AND REGULATIONS, THIS NOTICE IS TO INFORM YOU THAT THE
CORPORATION HAS ELECTED NOT TO PAY THE 2002 INTANGIBLE TAX AS
AGENT FOR ITS FLORIDA STOCKHOLDERS.

THE VALUE PER SHARE OF COMMON STOCK PER CORPORATE RECORDS
IS \$5.00 AT DECEMBER 31, 2001.