FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State
04-16-2002 90134 035 ***150.00

DOCUMENT # 410704

1. Entity Name TUGGLE MOTORS, INC.
10/13/72

DO NOT WRITE IN THIS SPACE

83051

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2. Principal Place of Business	3. Mailing Address
2200 SW 56TH AVE	ANDREW H. ACCETTURO ~~2200 SW 56TH AVE~~
Suite, Apt. #, etc. BIG A AUTO RECYCLERS	Suite, Apt. #, etc. 16 ROYAL PALM WAY
City & State HOLLYWOOD, FL.	City & State BOCA RATON, FL.
Zip 33023 Country BROWARD	Zip 33432 Country PALM BEACH

4. FEI Number 59-142181 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. **Name and Address of Current Registered Agent**

Name ANDREW H. ACCETTURO

Street Address (P.O. Box Number is Not Acceptable) 16 ROYAL PALM WAY - UNIT 101

City BOCA RATON FL Zip Code 33432

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) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	PRES
NAME	ANDREW H. ACCETTURO
STREET ADDRESS	16 ROYAL PALM WAY - APT 101
CITY-ST-ZIP	BOCA RATON, FL. 33432
TITLE	SEC. T
NAME	BARBARA T. ACCETTURO
STREET ADDRESS	16 ROYAL PALM WAY - APT 101
CITY-ST-ZIP	BOCA RATON, FL. 33432
TITLE	V.P
NAME	MICHAEL ACCETTURO
STREET ADDRESS	6824 S.W. 16TH CT.
CITY-ST-ZIP	PEMBROKE PINES
TITLE	
NAME	
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW H ACCETTURO 4/5/02 561-9958802
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #