FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

02 AUG 28 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-08/30/02--01055--026
****306.25 *****61.25

DOCUMENT # 426726

1. Entity Name
SMART CHOICE AUTOMOTIVE GROUP, INC.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
5200 S. WASHINGTON AVE	P.O. BOX 5020
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: TITUSVILLE FL.	City & State: WINTER PARK, FL.
Zip: 32780 Country: US	Zip: 32793 Country: US

4. FEI Number: 59-1469577 ☐ Applied For ☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name: JAMES E. ERNST

Street Address (P.O. Box Number is Not Acceptable): 5200 S. WASHINGTON AVE.

City: TITUSVILLE FL Zip Code: 32780

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: James E. Ernst — 8-19-2002
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	P, D
NAME	JAMES E. ERNST
STREET ADDRESS	P.O. BOX 5020
CITY-ST-ZIP	WINTER PARK, FL. 32793
TITLE	VP, A
NAME	LARRY D. KIEM
STREET ADDRESS	P.O. BOX 5020
CITY-ST-ZIP	WINTER PARK, FL. 32793
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 asterisk, with all other like empowered.

SIGNATURE: Larry D. Kiem LARRY D. KIEM — 8/19/02 — (407) 963-9886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

gf 8/28/02