

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # 447367**

1. Entity Name

**LEWIS FOREIGN CAR SERVICE, INC.****FILED**  
**Jan 31, 2001 8:00 am**  
**Secretary of State**

01-31-2001 90001 041 \*\*\*158.75

Principal Place of Business

**4430 NORTH DIXIE HWY  
FT. LAUDERDALE FL 33334**

Mailing Address

**4430 NORTH DIXIE HWY  
FT. LAUDERDALE FL 33334**

2. Principal Place of Business

**4455 N.E. 10TH AVE.**

3. Mailing Address

**4455 N.E. 10TH AVE.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

**FT. LAUDERDALE, FL.**

City &amp; State

**FT. LAUDERDALE, FL.**

Zip

**33334**

Country

**USA**

Zip

**33334**

Country

**USA**4. FEI Number **59-1516817**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**BAKER, RONALD M  
4430 N DIXIE HIGHWAY  
FT. LAUDERDALE FL 33334**

7. Name and Address of New Registered Agent

Name

**MARK A ZORILLO**

Street Address (P.O. Box Number is Not Acceptable)

**2140 N.E. 35TH ST.**

City

**LIGHTHOUSE POINT**

FL

Zip Code

**33064**

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

**MARK A ZORILLO****OWNER****1/15/01**

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, 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	P	BAKER, RONALD M.	<input checked="" type="checkbox"/> Delete
NAME		1930 N.W. 41ST STREET	
STREET ADDRESS		FT. LAUD. FL	
CITY-ST-ZIP			

TITLE	S	BAKER, JOAN H	<input checked="" type="checkbox"/> Delete
NAME		1930 N W 41TH ST	
STREET ADDRESS		FT LAUD, FL 00000	
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRES	MARK A. ZORILLO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2140 N.E. 35 ST	
STREET ADDRESS		LIGHTHOUSE POINT, FL. 33064	
CITY-ST-ZIP			

TITLE	VICE PRES	CAROLINE T. ZORILLO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2140 N.E. 35TH ST.	
STREET ADDRESS		LIGHTHOUSE POINT, FL. 33064	
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**MARK A ZORILLO**

Date

Daytime Phone #

**954 772-1171**

CR2E034 (10/00)

0276542