

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 542254

1. Entity Name

GEORGE NAHAS OLDSMOBILE, INC.

FILED
Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90126 038 ***150.00

0084032

Principal Place of Business

200 EAST BURLEIGH BOULEVARD
P O BOX 427
TAVARES FL 32778

Mailing Address

200 EAST BURLEIGH BOULEVARD
P O BOX 427
TAVARES FL 32778

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 59-1756118

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TRAVIS, ROBERT T.
1003 LAKE NETTIE DR.
EUSTIS FL 32726

7. Name and Address of New Registered Agent

Name

Tami Lowe

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

24534 Polar Bear Road

P.O. Box 591

City

PAISLEY

FL

Zip Code

32767

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 Tami Lowe, Tami Lowe, Corp. Secretary 4-4-01

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 PD
NAME NAHAS, GEORGE ☐ Delete
STREET ADDRESS 2024 ALAMEDA AVENUE
CITY-ST-ZIP ORLANDO FL

TITLE S
NAME TRAVIS, ROBERT ☒ Delete
STREET ADDRESS 1003 LAKE NETTIE DR.
CITY-ST-ZIP EUSTIS FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE Secretary ☒ Change ☐ Addition
NAME Tami Lowe
STREET ADDRESS 24534 Polar Bear Rd
CITY-ST-ZIP PAISLEY, FL 32767

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

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

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

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:

Tami Lowe, Corp. Secretary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-4-01 352-343-5005

CR2E034 (10/00)