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

## May 17, 2001 8:00 am Secretary of State **DOGUMENT # 692762** 05-17-2001 90410 041 \*\*\*550.00 AUTO EMPORIUM, INC. Principal Place of Business Mailing Address · MAASOATA 1099 W HWY 436 110 LAKE BRANTLEY TERRACE 1 ALTAMONTE SPRINGS FL 32714 LONGWOOD FL 32779 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2111664 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GRAHAM, JON PAUL Street Address (P.O. Box Number is Not Acceptable) 110 LAKE BRANTLEY TERR. LONGWOOD FL 32779 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition TITLE ☐ Delete TITLE NAME GRAHAM, J. PAUL NAME STREET ADDRESS 110 LAKE BRANTLEY TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LONGWOOD FL ☐ Delete ☐ Addition TITLE TITLE NAME GRAHAM, LESLYE A. NAME STREET ADDRESS 110 LAKE BRANTLEY TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LONGWOOD FL ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. Thereby 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

SIGNATURE:

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.

CR2E034 (10/00)

To Whom It May Concern.

I would sincerely appreciate your ionsideration regarding the matter of the \$400 penalty.

and have never been late with this uport. Our business is in severe decline, and my husband has taken another job. Unfortunately, this report was put aside and forgotten. And, also, the 8400 is very important to us at this time.

waire or reduce the penalty, we would be extremely grateful.

Sincerely,

Leslye A. Graham)
110 Lake Brantley Terrace
Longwood, Fl. 32799

(407) 788-3525