

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A27425**

AND
FILED

1. Entity Name

ALL SERVICE AUTO PLAZA LIMITED PARTNERSHIP

00 APR -3 PM 12:13

Principal Place of Business

2615 S. UNIVERSITY DR.
DAVIE FL 33328

Mailing Address

POST OFFICE BOX 15728
PLANTATION FL 33318-5728

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0096011

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STELNIK, MARK E.
2615 S. UNIVERSITY DR.
DAVIE FL 33328

Name

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

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$304,920.00

10. Amount of Capital Contributions
in FLORIDA to date.

300,104.19

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **K31684**
NAME **ALL SERVICE AUTO PLAZA, INC**
STREET ADDRESS **2615 S. UNIVERSITY DR.**
CITY - ST - ZIP **DAVIE FL 33328**

STREET ADDRESS

CITY - ST - ZIP

300003215613--2
-04/19/00--01113--021
******526.25 ****526.25**

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CITY - ST - ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

All Service Auto Plaza Limited Partnership by All Service Auto Plaza, Inc., General Partner

SIGNATURE:

Mark E. Stelnik
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Mark E. Stelnik
Vice President

3/28/00

954 474-2800

Date

Daytime Phone #