

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90307 006 ***150.00

US 15000
A1

DOCUMENT # F00000004917

1. Entity Name
A.I.N. CORPORATION



Principal Place of Business

**3170 CROW CANYON PLACE, SUITE 270
SAN RAMON CA 94583**

Mailing Address

**C/O AUTOBYTEL.COM INC.
18872 MACARTHUR BLVD.
IRVINE CA 92612**

2. Principal Place of Business

18872 MacArthur Blvd.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Irvine, CA

City & State

Zip

92612-1400

Country

Zip

Country

4. FEI Number

68-0327737

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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. 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, 2002 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** ☒ Delete
NAME **GORUN, MICHAEL J**
STREET ADDRESS **3170 CROW CANYON PLACE, SUITE 270**
CITY-ST-ZIP **SAN RAMON CA 94583**

TITLE **VSD** ☐ Delete
NAME **AMIR, ARIEL**
STREET ADDRESS **18872 MACARTHUR BLVD.**
CITY-ST-ZIP **IRVINE CA 92612**

TITLE **VT** ☐ Delete
NAME **KOTHARI, AMIT**
STREET ADDRESS **18872 MACARTHUR BLVD.**
CITY-ST-ZIP **IRVINE CA 92612**

TITLE **D** ☒ Delete
NAME **MCCARTER, JOSHUA**
STREET ADDRESS **18872 MACARTHUR BLVD.**
CITY-ST-ZIP **IRVINE CA 92612**

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 **Director/President** ☐ Change ☒ Addition
NAME **Jeffrey A. Schwartz**
STREET ADDRESS **18872 MacArthur Blvd.**
CITY-ST-ZIP **Irvine, CA 92612-1400**

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

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

TITLE **Director** ☐ Change ☒ Addition
NAME **Hoshi Printer**
STREET ADDRESS **18872 MacArthur Blvd.**
CITY-ST-ZIP **Irvine, CA 92612-1400**

TITLE **Senior Vice President** ☐ Change ☒ Addition
NAME **Andrew Donchak**
STREET ADDRESS **18872 MacArthur Blvd.**
CITY-ST-ZIP **Irvine, CA 92612-1400**

TITLE **Vice President** ☐ Change ☒ Addition
NAME **Mark Ernst**
STREET ADDRESS **18872 MacArthur Blvd.**
CITY-ST-ZIP **Irvine, CA 92612-1400**

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 REQUIRED Ariel Amir

02/01/02

(949) 225-4500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)