

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 OCT -3 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-10/04/02--01037--006

*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE

DOCUMENT # F 08364

1. Entity Name

D & D Automotive, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
16830 S.W. 96th Court

3. Mailing Address
16830 S.W. 96th Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number
59-2046882

Applied For
Not Applicable

Zip 33157 Country USA

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

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7. Name and Address of Current Registered Agent

Name
Duane Clarke

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

16830 S.W. 96th Court

City Miami FL Zip Code 33157

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 Duane Clarke, Pres.

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

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 President
NAME Duane Clarke
STREET ADDRESS 6244 N.W. 175th Terrace
CITY - ST - ZIP Hialeah, FL 33015

TITLE Treasurer, Secretary
NAME Christine Clarke
STREET ADDRESS 6244 N.W. 175 Terrace
CITY - ST - ZIP Hialeah, FL 33015

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Duane Clarke, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)