

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F87999

FILED  
Apr 11, 2003  
Secretary of State

Entity Name: COASTAL AUTO BROKERS, INC.

## Current Principal Place of Business:

C/O AUTO AMERICA  
140 N. HARBOR CITY BLVD  
MELBOURNE, FL 32935 US

## New Principal Place of Business:

## Current Mailing Address:

C/O AUTO AMERICA  
140 N. HARBOR CITY BLVD  
MELBOURNE, FL 32935 US

## New Mailing Address:

FEI Number: 59-2204738

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ONDRIEZEK, THOMAS  
131 ISLAND VIEW DR.  
INDIAN HARBOR BEACH, FL 32937 US

## Name and Address of New Registered Agent:

ONDRIEZEK, THOMAS  
690 FOUNTAIN BLVD  
SATELLITE BEACH, FL 32937 US

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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/11/2003

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: ONDRIEZEK, THOMAS,  
Address: 690 FOUNTAIN BLVD  
City-St-Zip: SATELLITE BEACH, FL 32937

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS ONDRIEZEK

PS

04/11/2003

Electronic Signature of Signing Officer or Director

Date