2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 13, 2001 8:00 am Secretary of State DOCUMENT # F9700006236 7168 2901 434 8 UAG KISSIMMEE MOTORS, INC. 02-13-2001 90569 004 ***150.00 Principal Place of Business Mailing Address 2535 N. ORANGE BLOSSOM TR. 13400 OUTER DRIVE W KISSIMMEE FL 34744 B-36 DETROIT MI 48239 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 58-2361341 Not Applicable 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 Name C.T. CORPORATION SYSTEM ... Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 Zip Code FL 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 Fiorida. 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 FILE NOW!!! FEE IS \$150.00 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 11, OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DS TITLE ☐ Delete TITLE Change ☐ Addition KURNICK, ROBERT H JR NAME NAME 13400 OUTER DR W STE B-36 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DETROIT MI 48239** CITY-ST-ZIP ☐ Delete TITLE Change Addition DAVIDSON, JAMES R NAME NAME ONE HARMON PLAZA 9TH FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIF SECAUCUS NJ 07094 CITY-ST-ZIE TITLE ☐ Delete TITLE ☐ Addition ☐ Change HUNT, KENNETH W-NAME STREET ADDRESS 2535 N ORANGE BLOSSOM TR STREET ADDRESS CITY-ST-ZIP KISSIMMEE FL 34744 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition CARTER, ROGER NAME NAME STREET ADDRESS 2535 N ORANGE BLOSSOM TR STREET ADDRESS CITY-ST-ZIP KISSIMMEE FL 34744 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition WOLFE, BERNHARD W NAME NAME STREET ADDRESS 13400 OUTER DR W B-36 STREET ADDRESS CITY-ST-ZIP DETROIT MI 48239 CITY-ST-ZIP

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 empower

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

AS

NIEMAN, SANDRA

DETROIT MI 48239

13400 OUTER DR W B-36

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

/-18-2001 313 592-7550

Change

Addition