

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90168 031 ***150.00

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DOCUMENT # G32382

1. Entity Name
WORLD CARS, INC.



Principal Place of Business
**100 NW 12TH AVE.
DEERFIELD BEACH FL 33442
US**

Mailing Address
**111 NW 12TH AVE
LEGAL DEPT. JMFDF018
DEERFIELD BEACH FL 33442
US**



2. Principal Place of Business

100 JIM MORAN BLVD.
Suite, Apt. #, etc.

3. Mailing Address

100 JIM MORAN BLVD.
Suite, Apt. #, etc. **LEGAL DEPT. JMFDF018**

City & State
DEERFIELD BEACH FL

City & State
DEERFIELD BEACH FL

Zip
33442

Country
USA

Zip
33442

Country
USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2332675**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	MORAN, PATRICIA G	
STREET ADDRESS	100 NW 12TH AVE	
CITY-ST-ZIP	DEERFIELD BCH FL 33442	
TITLE	DVP	<input type="checkbox"/> Delete
NAME	CZUBAY, KENNETH M	
STREET ADDRESS	100 NW 12TH AVENUE	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	AS	<input type="checkbox"/> Delete
NAME	SNEAD, CAREN	
STREET ADDRESS	100 NW 12 AVE	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	D	<input type="checkbox"/> Delete
NAME	THOMAS, GARY L	
STREET ADDRESS	100 NW 12TH AVENUE	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	VPGC	<input type="checkbox"/> Delete
NAME	WARD, L T III	
STREET ADDRESS	100 NW 12 AVE	
CITY-ST-ZIP	DEERFIELD BCH FL 33442	
TITLE	S	<input type="checkbox"/> Delete
NAME	WHELAN, JOHN J	
STREET ADDRESS	100 NW 12 AVE	
CITY-ST-ZIP	DEERFIELD BCH FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORAN, PATRICIA G	
STREET ADDRESS	100 JIM MORAN BLVD.	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CZUBAY, Kenneth M	
STREET ADDRESS	100 JIM MORAN BLVD.	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SNEAD, CAREN J.	
STREET ADDRESS	100 JIM MORAN BLVD.	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS, GARY L.	
STREET ADDRESS	100 JIM MORAN BLVD.	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	VPGC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WARD, L. TAYLOR III	
STREET ADDRESS	100 JIM MORAN BLVD.	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHELAN, JOHN J.	
STREET ADDRESS	100 JIM MORAN BLVD.	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JOHN J. WHELAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)