

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H54088

1. Entity Name

EUROPEAN VEHICULAR EQUIPMENT, INC.

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90140 001 ***158.75

Principal Place of Business

Mailing Address

14905 S. SPUR DR
MIAMI FL 33161

P OBOX 600550
MIAMI FL 33160

2. Principal Place of Business

3. Mailing Address

10101 S.W. 138 St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI, FL

4. FEI Number

59-2530531

Applied For

Not Applicable

Zip

Country

Zip

33176

Country

DADE

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MILLER, MICHAEL M
10101 SW 138 ST
MIAMI FL 33176

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

<p>P</p> <p>KROIS, HERBERT</p> <p>16058 NE 21ST AVE.</p> <p>N. MIAMI BCH. FL 33162</p> <p><input type="checkbox"/> Delete</p>	<p>P</p> <p>KROIS, HERBERT</p> <p>10101 S.W. 138 STREET</p> <p>MIAMI, FL 33176</p> <p><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p>VP</p> <p>KROIS, CAROLE</p> <p>16058 NE 21ST AVE.</p> <p>N. MIAMI BCH. FL 33162</p> <p><input type="checkbox"/> Delete</p>	<p>VP</p> <p>KROIS, CAROLE</p> <p>10101 S.W. 138 STREET</p> <p>MIAMI, FL 33176</p> <p><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</p>
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<p><input type="checkbox"/> Delete</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>

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:

Carole Krois VP CAROLE KROIS

4-7-2000 305 232 2994

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)