2000 UNIFORM BUSINESS REPORT (UBR)

-O TYPED OR PRINTED NAME OF SIGNING OFFICE

FILED Jun 16, 2000 8:00 am Secretary of State **DOCUMENT # H75214** 1. Entity Name KING MOTOR COMPANY OF NORTH BROWARD 05-09-2000 90092 005 ***158.75 Principal Place of Business Mailing Address 4230 N FEDERAL HIGHWAY 700-900 E. SUNRISE BLVD LIGHTHOUSE POINT FL 33084 FT. LAUDERDALE FL 33304 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2605809 Not Applicable Zο Country Zip 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 Nama APPLEBY, EDWARD A Street Address (P.O. Box Number is Not Acceptable) 4230 N. FEDEDRAL HWY LIGHTHOUSE POINT FL 33064 Zip Code City 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 cignsture required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition APPLEBY, EDWARD NAME STREET ADDRESS 4250 N FEDERAL HIGHWAY STREET ADDRESS City-ST-ZIP CITY-ST-ZIP LIGHTHOUSE POINT FL Addition TITLE Delete TITLE ☐ Change KING, CLAY W NAME STREET ADDRESS 700-900 E. SUNRISE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-7P FT LAUDERDALE FL ☐ Addition ☐ Delete TITLE ☐ Change TITLE FRANCIS, KIRK NAME NAME STREET ADDRESS 900 E SUNRISE BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL Addition D'Ochete πī Change GALE, JEFFREY M. NAME MAME STREET ADDRESS STREET ADDRESS 700-900 E. SUNRISE BLVD. CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33304 PD TITLE TITLE ☐ Change ☐ Addition Deleta APPLEBY, EDWARD NAME MALIF STREET ADDRESS STREET ADDRESS 700 E SUNRISSE BLVD CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33304 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-21P CITY-57-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 supplier sintal 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 receive in trustee-empression edges are under the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive in trustee-empression edges are under the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive in trustee-empression edges are under the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive in the information supplies that the information indicated in the information of the corporation or the information indicated in the information of the information indicated in this report or supplies in the information indicated Y-5J7-37/ SIGNATURE: