

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2000 8:00 am
Secretary of State

05-06-2000 90108 001 *1,650.00

DOCUMENT # K35592

1. Entity Name
JM AUTO, INC.

Principal Place of Business: **5350 WEST SAMPLE RD. MARGATE FL 33063 US**

Mailing Address: **100 NW 12TH AVE DEERFIELD BEACH FL 33442-1702**

2. Principal Place of Business: **5350 WEST SAMPLE RD. MARGATE FL 33063 US**

3. Mailing Address: **111 NW 12TH AVENUE DEERFIELD BEACH FL 33442**

Suite, Apt. #, etc.: **LEGAL DEPT - JMFDF018**

City & State: **DEERFIELD BEACH FL**

Zip: **33442** Country: **USA**



DO NOT WRITE IN THIS SPACE

4. FEI Number: **65-0088515** 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.

SIGNATURE: _____ (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	
TITLE: D NAME: BROWN, COLIN W STREET ADDRESS: 100 NW 12TH AVE CITY-ST-ZIP: DEERFIELD BEACH FL 33442	<input type="checkbox"/> Delete	TITLE: VP NAME: WARD, L. Taylor STREET ADDRESS: 100 NW 12TH AVENUE CITY-ST-ZIP: DEERFIELD BEACH FL 33442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: DV NAME: CZUBAY, KENNETH M STREET ADDRESS: 100 N.W. 12TH AVENUE CITY-ST-ZIP: DEERFIELD BEACH FL	<input type="checkbox"/> Delete	TITLE: VP NAME: Mullen, DAVID W. JR. STREET ADDRESS: 5350 West Sample Rd CITY-ST-ZIP: MARGATE FL 33442	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DP NAME: MORAN, PATRICIA A. STREET ADDRESS: 100 N.W. 12TH AVENUE CITY-ST-ZIP: DEERFIELD BEACH FL	<input type="checkbox"/> Delete	TITLE: T NAME: Allen, A. TUCKER STREET ADDRESS: 100 NW 12TH AVENUE CITY-ST-ZIP: DEERFIELD BEACH FL 33442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: DVP NAME: BROWN, COLIN W STREET ADDRESS: 100 NW 12TH AVENUE CITY-ST-ZIP: DEERFIELD BEACH FL	<input checked="" type="checkbox"/> Delete	TITLE: AS NAME: SNEAD, CALENT J. STREET ADDRESS: 100 NW 12TH AVENUE CITY-ST-ZIP: DEERFIELD BEACH FL 33442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: S NAME: WHELAN, JOHN J. STREET ADDRESS: 100 NW 12TH AVENUE CITY-ST-ZIP: DEERFIELD BEACH FL	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 empowered.

SIGNATURE: **John J. Whelan** SECRETARY Date: **04/27/00** Daytime Phone #: **954-429-2000**

CR2E034 (9/99)