

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K46036

1. Entity Name

CLASSIC MOTORING ACCESSORIES, INC.

Principal Place of Business

5008 WEST LINEBAUGH, SUITE ~~14~~  
TAMPA FL 33624

Mailing Address

5008 WEST LINEBAUGH, SUITE ~~14~~  
TAMPA FL 33624

2. Principal Place of Business

5008 WEST LINEBAUGH

3. Mailing Address

5008 WEST LINEBAUGH

Suite, Apt. #, etc.

SUITE 60

Suite, Apt. #, etc.

SUITE 60

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33624

Zip

33624

Country

6. Name and Address of Current Registered Agent

FREIBERG, TERRY  
5008 WEST LINEBAUGH, SUITE ~~14~~ SUITE 60  
TAMPA FL 33624

Name

TERRY FREIBERG

Street Address (P.O. Box Number is Not Acceptable)

5008 WEST LINEBAUGH  
SUITE 60

City

TAMPA

FL

Zip Code  
33624

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 TERRY FREIBERG PRES. & CEO

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

Terry Freiberg

1-09-01

DATE

(NOTE: Registered Agent signature required when amending)

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, 2001 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 FREIBERG, TERRY  
STREET ADDRESS 5008 W LINEBAUGH, ~~14~~  
CITY-ST-ZIP TAMPA FL

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change

Addition

TITLE D  
NAME FREIBERG, JAN  
STREET ADDRESS 5008 W LINEBAUGH, ~~14~~  
CITY-ST-ZIP TAMPA FL

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change

Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change

Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change

Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change

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:

Terry Freiberg, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED  
Mar 23, 2001 8:00 am  
Secretary of State

03-23-2001 90014 023 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2917070**  Applied For  
 Not Applicable

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

CR2E034 (10/00)

Date

Daytime Phone #