

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000003830

1. Entity Name

SPORT CARS 2 INTERNATIONAL LLC

Principal Place of Business

Mailing Address

343 ALMERIA AVENUE
CORAL GABLES FL 33134

343 ALMERIA AVENUE
CORAL GABLES FL 33134

2. Principal Place of Business

C/O ESTHER Z BEJAR, CPA

Suite, Apt. #, etc.

420 LINCOLN ROAD STE 357

City & State

MIAMI BEACH FL 33139

Zip

Country

3. Mailing Address

C/O ESTHER Z BEJAR, CPA

Suite, Apt. #, etc.

420 LINCOLN RD STE 357

City & State

MIAMI BEACH FL 33139

Zip

Country

4. FEI Number

65-0932565

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, PA
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name
ESTHER Z. BEJAR, CPA, PA

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

420 LINCOLN RD STE 357

City
MIAMI BEACH

FL

Zip Code

33139

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]

ESTHER Z. BEJAR

8/30/2001

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

000004598120--8

-09/19/01--01024--030

*****55.00 *****55.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
FIROUZ SAID ANSARY
STREET ADDRESS
343 ALMERIA AVENUE STE 589
CITY - ST - ZIP
CORAL GABLES, FL 33134

☐ Delete

TITLE
NAME
MANAGER
AMIR ALI SAID ANSARY
STREET ADDRESS
343 ALMERIA AVENUE STE 589
CITY - ST - ZIP
CORAL GABLES, FL 33134

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
420 LINCOLN RD STE 357
MIAMI BEACH FL 33139

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
420 LINCOLN RD STE 357
MIAMI BEACH FL 33139

☒ Change ☐ Addition

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STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]*

FIROUZ SAID ANSARY

8/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date

Daytime Phone #

FILED

01 SEP -4 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E083 (11/00)