## **2000 UNIFORM BUSINESS REPORT (UBR)**

						YATKU		
DOCUMENT # M9800000588  1. Entity Name					FILED			
MIAMI LAKES AUTOMOTIVE, L.L.C.					00 MAY - 2 AM 9: 18			
			1		SECRET	ARY OF STATE SSEE, FLORIDA	·	
Principal Place of Business Mailing Address					TĀĒLAHĀ	(SSEE, FLUKIUE	1	
16600 N.W. 57TH AVENUE 16600 N.W. 57TH AVENUE								
MIAMI FL 33014 MIAMI FL 33014-6123								
	ye.							
2. Principal P	Place of Business	1			#NA 8800 8800 8800 8800 8808			
			LEON BI	الالا	• • • • • • • • • • • • • • • • • • • •			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	WITE 600		DO NOT WR	ÎTE IN THIS SPACE		
City & State		City & State	City & State		4. FEI Number S2-2097666 Applied For Not Applicable			
<del></del>			BLES Z	3 P C		<del></del>	lot Applicable	
Zip	Country	33134	Country USA	<b>5.</b> Cert	ificate of Status Desired	□ \$5.00 Ac Fee Requir		
<u> </u>	6. Name and Address of Current F			7. Nam	e and Address of New	Registered Agent		
Name								
YUSKO, DAVID  Street Address (P.O. Box Number is Not Acceptable)  3191 CORAL GABLES WAY, SUITE 1005  Street Address (P.O. Box Number is Not Acceptable)  23.33 LONCE DE LEON BLUID							6 100	
3191 CORAL GABLES WAY, SUITE 1005 2333 YONCE de LEON BUD SUITE 600 CORAL GABLES FL 33145								
COMAL G	ADDEO I E SO 140		Şity_			☐ Zin Coo	de /	
		<del>-</del>	(L)K		3685	FL Zig Cg	134	
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 a	tura required when reinsta	ting)	DATE				
	المراجع	Make Check Pa	yable to Depar	tment of State	٠			
9.	MANAGING MEMBE	RS/MEMBERS	10.		ADDITIONS	/ CHANGES		
TITLE	MGRM	∠ Delete	TITLE	MERM		☐ Change	-Addition (	
NAME	GOLD COAST AUTO MALL, INC.			PLANET	AUTOMOTIL	IE GROUP, =	TNC	
STREET ADDRESS CITY-ST-ZIP	SIST COINE CADECO WAT, COITE 1000				UCE de LEON GABLES F	1 33/34	72 000	
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NAME	NAME				2000032592725			
STREET ADDRESS CITY-ST-ZIP					-05/19/0001078003 **********************************			
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STREET ADDRESS	manufacture of the same		STREET ADDRESS. CITY-ST-ZIP	يو جيت عصار ا		-		
TITLE	•		TITLE			Change	Addition	
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STREET ADDRESS	,		STREET ADDRESS CITY-ST-ZIP					
CITY-ST-ZIP	partify that the information supplied with	this filling does not qualify for		ted in Section 110	07(3)(i) Florida Statutos	I further certify that the	information	
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 going of the execute this report as required by Chapter 608, Florida Statutes.								
infinited flability company of a receiver in trustee empowered to execute this report as required by chapter doo, it folial diatatics.								
SIGNAT	TIRE!	VOE REQUI		$\mathfrak{D} \cdot \mathfrak{d}$	-26-00	305-774-	7690	
		TED MANE OF SIGNING MANAGING	MEMBER OR MANAGES	<del> </del>	Cate	Daytime Phone #		