

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000006053

1. Entity Name

MOPARS OF THE PALM BEACHES, INC.

FILED
Feb 07, 2000 8:00 am
Secretary of State

02-07-2000 90005 011 ****61.25

Principal Place of Business

12429 189TH CT N
JUPITER FL 33478
US

Mailing Address

12429 189TH CT N
JUPITER FL 33478-3724
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0544304

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOANNE M DAVIS
12429 189TH CT N
JUPITER FL 33478

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME ROMANELLI, RICHARD
STREET ADDRESS 17715 38TH LANE NORTH
CITY-ST-ZIP LOXAHATCHEE FL

TITLE PD ☒ Change ☐ Addition
NAME Jarrod Pilone
STREET ADDRESS 4320 NE 12th Terrace
CITY-ST-ZIP Pompano Beach, FL 33064

TITLE SD ☐ Delete
NAME JOANNE MOONEY-DAVIS
STREET ADDRESS 12429 189TH CT N
CITY-ST-ZIP JUPITER FL

TITLE VPD ☐ Change ☒ Addition
NAME Glenn Davis
STREET ADDRESS 12429 189th Ct N.
CITY-ST-ZIP Jupiter, FL 33478

TITLE ST ☐ Delete
NAME SMEDLEY, RICKY
STREET ADDRESS 12218 57TH RD N.
CITY-ST-ZIP ROYAL PALM BEACH FL

TITLE D ☐ Change ☒ Addition
NAME Roland Duclos
STREET ADDRESS 412 7th Ave North
CITY-ST-ZIP Lake Worth, FL 33460-2602

TITLE D ☐ Delete
NAME PILONE, JARROD
STREET ADDRESS 4320 NE 12TH TERRACE
CITY-ST-ZIP POMPANO BEACH FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME KIM ROMANELLI
STREET ADDRESS 17715 38TH LANE NORTH
CITY-ST-ZIP LOXAHATCHEE FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD ☒ Delete
NAME SWEETING, ALAN
STREET ADDRESS 12242 OLD GODFREY ROAD
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature Required
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/20/00

Date

561-744-7963

Daytime Phone #

CR2E037 (9/99)