

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000001977

FILED
Aug 08, 2002
Secretary of State

Entity Name: WHEELS OF EXCELLENCE, INC.

Current Principal Place of Business:

3720 W OAKLAND PARK BLVD
LAUDERDALE LAKES, FL 33311

New Principal Place of Business:

2680 NW 31 AVENUE
LAUDERDALE LAKES, FL 33311

Current Mailing Address:

3720 W OAKLAND PARK BLVD
LAUDERDALE LAKES, FL 33311

New Mailing Address:

2680 NW 31 AVENUE
LAUDERDALE LAKES, FL 33311

FEI Number: 65-0718377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOMERS, DAVID W
3720 W OAKLAND PARK BLVD
LAUDERDALE LAKES, FL 33311 US

Name and Address of New Registered Agent:

SHOMERS, DAVID W
2680 NW 31 AVENUE
LAUDERDALE LAKES, FL 33311 US

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:

08/08/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: FORD, FRANK
Address: 5103 NW 35 ST #504-D
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: DT () Delete
Name: SHOMERS, DAVID
Address: 4240 NW 36 WAY
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: DC () Delete
Name: RAYMOND, DANIEL N
Address: 4245 NW 52 AVE
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: D () Delete
Name: HUTCHINSON, THOMAS N
Address: 5574 SW 7 PLACE
City-St-Zip: MARGATE, FL 33068

Title: D () Delete
Name: BOROS, DAVID
Address: 4910 SW 11 CIRCLE
City-St-Zip: MARGATE, FL 33068

Title: D () Delete
Name: MAIELLO, VINCENT
Address: 123 DEERCREEK BLVD #204
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DTS (X) Change () Addition
Name: SHOMERS, DAVID
Address: 4240 NW 36 WAY
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID SHOMERS

DT

08/08/2002

Electronic Signature of Signing Officer or Director

Date