

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90052 022 ***150.00

DOCUMENT # P00000010003

1. Entity Name

AUTONET INTERNATIONAL GROUP, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10103 Hunt Club Ln

State, Apt. #, etc.

3. Mailing Address

← SAME

State, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Palm Beach Gardens

City & State

4. FEI Number

65-0979746

Applied For

Not Applicable

Zip

33418

Country

PALM BEACH

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name FRANK J. MARTINO

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

10103 Hunt Club Ln

City Palm Beach Gardens, FL

Zip Code 33418

**DO NOT WRITE
IN THIS SPACE**

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 registering)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$500.00

Amended UBR is \$61.25

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

TITLE P/M
NAME MARTINO, FRANK J.
STREET ADDRESS 10103 HUNT CLUB LN.
CITY, ST, ZIP PALM BEACH GARDENS, FL 33418

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

FRANK J. MARTINO

4/30/02 561-691-0065

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)