

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

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92205 019 ***150.00

DOCUMENT # P00000022074

1. Entity Name

Xtreme Jeep Sales, Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

14228 N. Florida Ave

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE.

City & State

Tampa FL

City & State

4. FEI Number

543624230

Applied For

☐ Not Applicable

Zip

33613

Country

HILLSBOROUGH

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Dominick Bianchi

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

27815 Quail View Lane

City

Wesley Chapel

FL

Zip Code

33544

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

5/1/03

Signature, typed or printed name of registered agent, and date (if applicable)

(NOT: Registered Agent Signature required when resigning)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

President
Dominick J. Bianchi, JR
27815 Quail View Lane
Wesley Chapel, FL 33544

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

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**DO NOT WRITE
IN THIS SPACE**

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 607, Florida Statutes, and that my name appears in Block 10 or on an attachment with an address, with all other persons empowered.

SIGNATURE:

[Signature]

5/1/03

(813) 264-7122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

TELEPHONE #

CR2E034B (12/02)