2001 UNIFORM BUSINESS REPORT (UBR)

Aug 24, 2001 8:00 am Secretary of State DGCUMENTI# P00000035341 07-19-2001 90235 017 ***150.00 CARL'S AUTO BODY, INC. Principal Place of Business Mailing Address AUV • ~ ~ 708 COMMERCE WAY WEST 708 COMMERCE WAY WEST JUPITER FL 33458 JUPITER FL 33458 2. Principal Place of Business 708 Conjugace they was DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1010491 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Holm Beach Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SCHMIDT, GEORGE C Street Address (P.O. Box Number is Not Acceptable) \$555 152ND RD NORTH JUPITER FL 33478 Zip Code 8. The above named entity submits this statement for the purpose of changing its registored office or registered agent, or both, in the State of Florida. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filling requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00) TITLE ☐ Change ☐ Addition Delete TITT F NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP 33478 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachmety with an address with all other tikes incovered.

TITLE NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Delete ...

☐ Change

Change

☐ Addition

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FILED

Hackmet Regest 19, 200/ Mirida Department of State, Mr. n. ... My annual report, uniform business report and check totaling 150.00 for Carls auto Dody Inc. (Reference # P0000003534 Tours) liked in a late status due to the following I have been under severe stress due to my wifes illness. She had a double nephrectomy at Jackson Memorial Hospital in Miami at the beginning of april which caused metto be absent from my business. Iwas not aware of appendity being issued if not filed onal timbly minner doder these cicienstances please waive the 400,00 spenatty Your immediate response there be greatly appreciated Pres Coats Auto BlyEnc.