## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

## Jan 13, 2001 8:00 am Secretary of State DOCUMENT # P0000047287 ROD'S TRANSMISSION AND AUTOMOTIVE PARTS, INC. 01-13-2001 90011 023 \*\*\*150.00 Principal Place of Business Mailing Address 6820 DARBY COURT 6820 DARBY COURT NAPLES FL 34104 NAPLES FL 34104 3. Mailing Address ercantile Ave DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent\_\_\_\_ Name RODRIGUEZ, TAMMY Street Address (P.O. Box Number is Not Acceptable) **6820 DARBY COURT** NAPLES FL 34104 City 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. (10/00)☐ Change ☐ Addition ☐ Delete TITLE NAME NAME RODRIGUEZ, DANILO A STREET ADDRESS STREET ADDRESS 6820 DARBY COURT CITY-ST-ZIP CITY-ST-7IP NAPLES FL 34104 ☐ Change ☐ Addition ☐ Delete TITLE NAME MAME RODRIGUEZ, TAMMY J STREET ADDRESS STREET ADDRESS 6820 DARBY COURT CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34104 Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete 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

FILED