

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000067915

1. Entity Name
TRUCK REPAIR 1, INC.

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90044 030 ***150.00

Principal Place of Business
1258 LORNEWOOD DRIVE
VALRICO FL 33594

Mailing Address
1258 LORNEWOOD DRIVE
VALRICO FL 33594

2. Principal Place of Business
2823 Overpass Road
Suite, Apt. #, etc.

3. Mailing Address
2823 Overpass Road
Suite, Apt. #, etc.

City & State
Tampa, FL

City & State
Tampa, FL

4. FEI Number
59-3659275

Applied For
Not Applicable

Zip Country
33619 Hillsborough

Zip Country
33619 Hillsborough

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

O'CONNOR, PATRICK M ESQ
C/O PATEL & O'CONNOR
2240 BELLEAIR ROAD STE 160
CLEARWATER FL 33594

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

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Delete
D REIDY, STEVEN R
STREET ADDRESS 1258 LORNEWOOD DRIVE
CITY-ST-ZIP VALRICO FL 33594

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
D RABINE, NORMAN C
STREET ADDRESS 3010 CUNARD DRIVE
CITY-ST-ZIP VALRICO FL 33594

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
D QUASNICK, DANIEL L
STREET ADDRESS 908 SANDYWOOD DRIVE
CITY-ST-ZIP BRANDON FL 33510

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
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 attachment with an address, with all other like empowered.

SIGNATURE: Steven R. Reidy 813/663-0911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)