

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90011 041 ***150.00

DOCUMENT # P00000079861

1. Entity Name
MOTOR CITY WRECKING, INC.

Principal Place of Business
2224 COBBLEFIELD CIR
APOPKA FL 32703

Mailing Address
2224 COBBLEFIELD CIR
APOPKA FL 32703

2. Principal Place of Business
217 Forest Ave.
 Suite, Apt. #, etc.

3. Mailing Address
PO Box 162800
 Suite, Apt. #, etc.

City & State **Altamonte Springs, FL**
Zip **32701** **Country** **Seminole**
City & State **Altamonte Springs, FL**
Zip **32716-2800** **Country** **Seminole**

4. FEI Number **59-3669571** **Applied For**
Not Applicable

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

6. Name and Address of Current Registered Agent

HARBERT, TRACEY A
2224 COBBLEFIELD CIR
APOPKA FL 32703

7. Name and Address of New Registered Agent

Name **Harbert, Tracey A.**
Street Address (P.O. Box Number is Not Acceptable) **217 Forest Ave.**
City **Altamonte Springs FL** **Zip Code** **32701**

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 *Tracey A. Harbert* **TRACEY A. HARBERT, PRESIDENT** **3/22/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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, 2002 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

TITLE	P	<input type="checkbox"/> Delete
NAME	HARBERT, TRACEY A	
STREET ADDRESS	2224 COBBLEFIELD CIR	
CITY-ST-ZIP	APOPKA FL 32703	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	HARBERT, PAUL A	
STREET ADDRESS	498 JOSLYN RD	
CITY-ST-ZIP	LAKE ORION MI 48362	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	HARBERT, MICHAEL W	
STREET ADDRESS	7253 CHERRY PASS	
CITY-ST-ZIP	OCALA FL 34472	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	HARBERT, PAUL R	
STREET ADDRESS	12 PALMETTO DR	
CITY-ST-ZIP	ORMOND BEACH FL 32176	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Harbert, Tracey A	
STREET ADDRESS	217 Forest Ave.	
CITY-ST-ZIP	Altamonte Springs, FL 32701	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Harbert, Teresa M	
STREET ADDRESS	1253 Cherry Pass	
CITY-ST-ZIP	Ocala, FL 34472	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Harbert, Jeannine M.	
STREET ADDRESS	217 Forest Ave.	
CITY-ST-ZIP	Altamonte Springs, FL 32701	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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: *Tracey A. Harbert* **TRACEY A. HARBERT** **3/22/02** **407/261-1314**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)