

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

**FILED**  
**Sep 04, 2002 8:00 am**  
**Secretary of State**

09-04-2002 90094 010 \*\*\*150.00

DOCUMENT # P00000080713  
1. Entity Name  
Automotive Strategies Incorporated

978240

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <u>502 South Fremont Ave.</u>		3. Mailing Address <u>533 South Howard Ave.</u>	
Suite, Apt. #, etc. <u>1102</u>		Suite, Apt. #, etc. <u>44</u>	
City & State <u>Tampa Florida</u>		City & State <u>Tampa Florida</u>	
Zip <u>33606</u>	Country <u>U.S.</u>	Zip <u>33606</u>	Country <u>U.S.</u>

DO NOT WRITE IN THIS SPACE

4. FEI Number <u>59-3667836</u>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name <u>Kris Thompson</u>
Street Address (P.O. Box Number is Not Acceptable) <u>502 South Fremont Ave.</u>
<u>#1102</u>
City <u>Tampa</u> FL Zip Code <u>33606</u>

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 Kris Thompson Kris Thompson owner 8/25/02  
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)

January 1 - May 1. Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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 NAME STREET ADDRESS CITY-ST-ZIP	<u>owner</u> <u>Kris Thompson</u> <u>502 South Fremont Ave. #1102</u> <u>Tampa, FL 33606</u>
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CR2E034B (12/01)

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

SIGNATURE: Kris Thompson Kris Thompson 8/25/02 813 930-8646  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attached

#

pb0000080713  
978240

I did not receive the paperwork  
to file on time. Please note  
my address: 533 South Howard Ave. #44  
update Tampa, FL 33606

Here is the filing for Automotive  
Strategies Incorporated.

Thank you,



Kris Thompson owner

8/25/02