

2001 UNIFORM BUSINESS REPORT (UBR)

5/11/

FILED
Jun 04, 2001 8:00 am
Secretary of State

05-11-2001 90129 015 ***150.00

DOCUMENT # P00000094057

Entity Name

BRAKES EXPRESS PLUS, INC.

Principal Place of Business
 3650 NORTHEAST 15TH STREET
 LAUDERHILL FL 33311

Mailing Address
 3650 NORTHEAST 15TH STREET
 LAUDERHILL FL 33311



DO NOT ABUSE THIS SPACE

2. Principal Place of Business
 3650 NW 15 St

3. Mailing Address
 SAME

City & State
 City: State:

4. FE Number
 65-1081101

City: State:

5. Certificate of Public Access
 \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent
 Name: ELI BARTOV
 Street Address: P.O. Box Number & Apt. Address:
 3650 NW 15 St
 City: LAUDERHILL FL 33311

8. This corporation has filed this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
 Signature: *Eli Bartov*

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so (See instructions 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 Contributor ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PSD BARTOV, ELI 3650 NORTHEAST 15TH STREET LAUDERHILL FL 33311 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD CAPLAN, GARY 3650 NORTHEAST 15TH STREET LAUDERHILL FL 33311 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TD BARTOV, IRWIN 3650 NORTHEAST 15TH STREET LAUDERHILL FL 33311 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete

12. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☒ Add 3650 NW 15 St
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☒ Change ☐ Add 3650 NW 15 St
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☒ Change ☐ Add TAUGLIR, IRWIN 3650 NW 15 St
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Add

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I hereby 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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Eli Bartov* 4/27/01 954-583-7755
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR