2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P00000110221

1. Entity Name

TOP NOTCH AUTO BROKERS, INC.



FILED Mar 06, 2003 8:00 am Secretary of State 03-06-2003 90093 025 ***150.00

Suite, Apl. 8, etc. Suko, Apl. 8, etc. City & State City & State 4. FEI Number 59-3687331 Applicable For For Not Applicable For Proceedings of Country Scartificate of Status Desired 58.75 Additional Fee Required Fee	14146 CR 45 CLERMONT I	FL 34711	1. C	Mailing Address 14146 CR 455 CLERMONT FL 34711							
City & State Street Address of New Registered Agent Name Street Address (Po. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the collegions of indigetered agent. SignAffure: SignAffure: SignAffure: SignAffure: Signam, yeard or ground area of indigeted agent with the State of Florida. FELL NOW!! FEE IS \$150.00 After May 1, 2003 Ree will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. NAME SIRRET ADDRESS OFFI-SLAPE ORANDO FL 28218 Debte THE NAME SIRRET ADDRESS OFFI-SLAPE ORANDO FL 28218 Debte THE NAME SIRRET ADDRESS OFFI-SLAPE ORANDO FL 28218 Debte THE NAME SIRRET ADDRESS OFFI-SLAPE ORANDO FL 28218 Debte THE NAME SIRRET ADDRESS OFFI-SLAPE ORANDO FL 28218 Debte THE NAME SIRRET ADDRESS OFFI-SLAPE OFFI-SLAPE ORANDO FL 28218 Debte THE NAME SIRRET ADDRESS OFFI-SLAPE OFFI-SLAPE ORANDO FL 28218 Debte THE NAME SIRRET ADDRESS OFFI-SLAPE OFFI-SLAPE ORANDO FL 28218 Debte THE NAME SIRRET ADDRESS OFFI-SLAPE OFFI-SLAPE ORANDO FL 28218 OFFI-SLAPE ORANDO FL 2	2. Principal Place of Business			3. Mailing Address			İ	£ INNIIINSI III NNIII NEIII NNIII NAIII NIII		1010 11001 1101 1021	
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S. Name and Address of Current Registered Agent YAWN, RODNEY L 14146 CR 455 CLERMONT FL 34711 6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. I am farmilie with, and accept the obligations of registered agent. SIGNATURE TILL ROW/III FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TILL ROW/III SERIES AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TILL ROW/III SERIES AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TILL ROW/III SERIES AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TILL ROW/III SERIES AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TILL ROW/III SERIES AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TILL ROW/III SERIES AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TILL ROW/III SERIES AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TILL ROW/III SERIES AND DIRECTORS 11. TILL ROW/III SERIES AND DIRECTORS IN 11. TILL ROW/III SERIES AND DIRECTORS 11. TILL R	Zip Country			Zip Country			5. (Certificate of Status Desired		Additional	
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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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR