

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000110453

1. Entity Name

NATION AUTO SALES OF SOUTH FLORIDA, INC.

Principal Place of Business

12263 NW 49TH DRIVE  
CORAL SPRINGS FL 33076

Mailing Address

12263 NW 49TH DRIVE  
CORAL SPRINGS FL 33076

2. Principal Place of Business

4026 S. STATE RD 7  
Suite, Apt. #, etc.

3. Mailing Address

12263 NW 49 DR  
Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

CORAL SPRINGS FL

Zip

33023

Country

BARBADOS

Zip

33076

Country

BARBADOS

4. FEI Number

65-1062888

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

LUBIN, MICHAEL H  
420 LINCOLN ROAD #602  
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name  
ARIE ABECASIS  
Street Address (P.O. Box Number is Not Acceptable)  
12263 NW 49 DR  
City  
CORAL SPRINGS FL Zip Code  
33076

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 ARIE ABECASIS (PRESIDENT)

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

02-02-01

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, 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

TITLE PSTD ☐ Delete  
NAME ABECASIS, ARIE  
STREET ADDRESS 12263 NW 49TH DRIVE  
CITY-ST-ZIP CORAL SPRINGS FL 33076

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VICE PRESIDENT ☐ Change ☒ Addition  
NAME YVONNE SCHIEBER  
STREET ADDRESS 1834 NW 94 AVE  
CITY-ST-ZIP PLANTATION FL 33322

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

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

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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

04-04-2001 90066 039 \*\*\*150.00

00041006



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)