

2002-UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2002 8:00 am
Secretary of State

07-18-2002 90127 035 ***150.00

DOCUMENT # P01000005816

1. Entity Name
DORIE'S AUTOS, INC.

Principal Place of Business

**400 N. 68 AVENUE
HOLLYWOOD FL 33024**

Mailing Address

**400 N. 68 AVENUE
HOLLYWOOD FL 33024**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1075300

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DORIE, DANUSH
400 N. 68 AVENUE
HOLLYWOOD FL 33024**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DORIE, DANUSH 400 N. 68 AVENUE HOLLYWOOD FL 33024	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

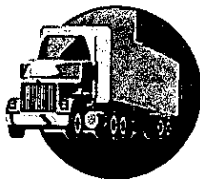
SIGNATURE REQUIRED
Danush
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/16/02

Date

954 9678170

CR2E034 (4/02)



DORIE'S AUTOS INC

400 N 68th Avenue, Hollywood Florida

Telephone: 954-322-0512

Attachment

*# PO 1000005816
122035*

July 10, 2002

The Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir/Madm,

On July 10, 2002, I received the Uniform Business Report from your offices. I called your offices at 850-488-9000 to inquire what it was all about, I spoke to a lady who told me this was a second notice, I told her that I did not receive the first and wanted to know what to do from there. She then informed me to send a check of \$150.00 along with the report that represents the filing fee.

The check of \$150.00 is enclosed and if you need further information please contact me on 954-967-8170.

Thank you.

Yours sincerely,

Danush Dorie
Danush Dorie
President