

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

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90971 018 ***150.00

DOCUMENT # P01000011569

1. Entity Name

UNIVERSAL FINANCIAL LEASING, INC.

DO NOT WRITE IN THIS SPACE

B0057483

2. Principal Place of Business

479 TURTLE CIRCLE

Suite, Apt. #, etc.

3. Mailing Address

479 TURTLE CIRCLE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

SATELLITE BEACH, FL.

City & State

SATELLITE BEACH, FL.

4. FEI Number

59-3727337

Applied For

Not Applicable

Zip

32937

Country

USA

Zip

32937

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

JAMES P. HOLLIS

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

479 TURTLE CIRCLE

City

SATELLITE BEACH

FL

Zip Code

32937

**DO NOT WRITE
IN THIS SPACE**

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

JAMES P. HOLLIS JAMES P. HOLLIS

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

(NOTE: Registered Agent signature required when translating)

3/22/02

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 \$81.25

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 PRESIDENT
NAME JAMES P. HOLLIS
STREET ADDRESS 479 TURTLE CIRCLE
CITY - ST - ZIP SATELLITE BEACH, FL. 32937

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IN THIS SPACE**

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:

JAMES P. HOLLIS JAMES P. HOLLIS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/02 321-779-0442

Date

Daytime Phone #

CR2E034B (12/01)