

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2003 8:00 am
Secretary of State

0142977 AT

DOCUMENT # P01000078588

1. Entity Name
UNITED AUTOMOTIVE ASSOCIATES, INC.



08-15-2003 90083 031 ***550.00

Principal Place of Business
**5132 HEATHERSTONE CT.
KISSIMMEE FL 34758**

Mailing Address
**5132 HEATHERSTONE CT.
KISSIMMEE FL 34758**



2. Principal Place of Business

1035 W. Lancaster Rd

Suite, Apt. #, etc.

Unit 1

City & State

Orlando, FL

Zip

32809

Country

3. Mailing Address

1035 W. Lancaster Rd

Suite, Apt. #, etc.

Unit 1

City & State

Orlando FL

Zip

32809

Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3734354

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SCHULTZ, RICHARD
5132 HEATHERSTONE CT.
KISSIMMEE FL 34758**

7. Name and Address of New Registered Agent

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)

CEO

8/13/03

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **CEO** ☐ Delete
NAME **SCHULTZ, RICHARD**
STREET ADDRESS **5132 HEATHERSTONE CT.**
CITY-ST-ZIP **KISSIMMEE FL 34758**

TITLE **PD** ☐ Delete
NAME **SCHULTZ, MELISSA**
STREET ADDRESS **5132 HEATHERSTONE CT.**
CITY-ST-ZIP **KISSIMMEE FL 34758**

TITLE **COO** ☐ Delete
NAME **HARA, DANIEL**
STREET ADDRESS **4108 LAKE UNDERHILL RD., APT. 305**
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☒ Change ☐ Addition
NAME **COO, D**
STREET ADDRESS **Daniel Hara**
CITY-ST-ZIP **11529 Darlington Rd
Orlando FL 32837**

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

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

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

12. 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 10 or Block 11 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

Richard Schultz 8/13/03 407-851-1560

Date

Daytime Phone #

CR2E034 (4/03)