

2002 UNIFORM BUSINESS REPORT (UBR)

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

08-18-2002 90129 047 ***150.00

DOCUMENT # P01000098493

1. Entity Name
FIVE STAR AUTOMOTIVE, INC.

Principal Place of Business
4612 RIDGEWOOD AVENUE
PORT ORANGE FL 32127

Mailing Address
4612 RIDGEWOOD AVENUE
PORT ORANGE FL 32127

974883



DO NOT WRITE IN THIS SPACE

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

☒ 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

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

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 **DANIEL LADAN**

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 **PD** ☐ Delete
NAME **LADAN, DANIEL A**
STREET ADDRESS **4512 RIDGEWOOD AVENUE**
CITY-ST-ZIP **PORT ORANGE FL 32127**

TITLE ☒ Change ☐ Addition
NAME **4612 RIDGEWOOD AVE.**
STREET ADDRESS **PORT ORANGE, FL 32127**
CITY-ST-ZIP

TITLE **V** ☐ Delete
NAME **BERGER, JASON A**
STREET ADDRESS **4512 RIDGEWOOD AVENUE**
CITY-ST-ZIP **PORT ORANGE FL 32127**

TITLE ☒ Change ☐ Addition
NAME **4612 RIDGEWOOD AVE.**
STREET ADDRESS **PORT ORANGE, FL 32127**
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **LADAN, MICHAEL L**
STREET ADDRESS **4512 RIDGEWOOD AVENUE**
CITY-ST-ZIP **PORT ORANGE FL 32127**

TITLE ☒ Change ☐ Addition
NAME **4612 RIDGEWOOD AVE**
STREET ADDRESS **PORT ORANGE, FL 32127**
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **LADAN, DORIS**
STREET ADDRESS **4512 RIDGEWOOD AVENUE**
CITY-ST-ZIP **PORT ORANGE FL 32127**

TITLE ☒ Change ☐ Addition
NAME **4612 RIDGEWOOD AVE**
STREET ADDRESS **PORT ORANGE, FL 32127**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/2/02 386-760-4667

CR2E034 (4/02)

Attachment
Doc. # P01000098493

Dear Sect of State 974883

I am enclosing a check
for \$150-. I never received
any prior information further
I just received this notice
today which I understand
was probably actually
mailed in June. This is
August. Apparently the postal
system was having a problem
previously

Please a statement of \$400-
assure you this will not
happen again

R. L.