2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #** P01000100209



FILED Feb 28, 2003 8:00 am Secretary of State

ALBERT'	S MOTOR, INC.				2-28-2003 90118 0	33 ***130	.00	
ALBERT'S M 933 28TH ST WEST PALM	: Beach FL 33407	Mailing Address ALBERT'S MOTOR INC. 933 28TH ST. WEST PALM BEACH FL 33	3407					
2. Principal A	Place of Business To Toc.	3. Mailing Address			1818) (1811 - 1 887), 35 11) 36 11 8 1 (1 6 1	i 1811) 681(8 ile)i		
Suite, Apt		Suite, Apt. #, etc.			CHECK HERE IF MAKIN	, IG CHANGES	i	
City & Sta	V.P.B	City & State		4. FEI Number 6	5-1147055	—	pplied For	
Zip 331	Country Country	Zip	Country		atus Desired 🔔 🗌 .	\$8.75 Ad	ot Applicable ditional	
	6. Name and Address of Current F	Registered Agent		7. Name and Addi	ress of New Registered	•	;Q	
			Name		. 3			
ALBERT, JEANTY 441 58TH ST.			Street Addr	Street Address (P.O. Box Number is Not Acceptable)				
WEST PA	LM BEACH FL 33407					•		
			City		FL	Zip Cod	e	
8. The above the obliga	e named entity submits this statement for tions of registered agent.	the purpose of changing its r	egistered office or reg	gistered agent, or both, in t	he State of Florida. I am	n familiar with,	and accept	
e 2								
SIGNATURE		of title 2 E Lt.						
	Signature, typed or printed name of registered agent an	id title if applicable. (NOTE:	Registered Agent signature re	equired when reinstating)	DATE			
F Afte	Signature, typed or printed name of registered agent and ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00		Registered Agent signature re	9. Election	Campaign Financing		O May Be	
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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 REQUIRED SIGNATURE:-_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #