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

DOCUMENT # P0/000/1/0/

1. Entity Name

TOM'S MOTORS OF BARBECVILLE, INC.



Apr 02, 2003 8:00 am Secretary of State

04-02-2003 90081 037 ***150.00

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	DO NOT WRITE	E IN THIS SI	PACI				e Const
2. Principal F	3. Mailing Address P.O. BOX 6	ng Address BOX 68					
Suite, Apt.	W.S. Hwy 17N #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State	eville, FL	City & State DAYTONA BEACH, FLURIDA			79-170237.5		Applied For Not Applicable
32180	Country	32115-0068	Country	S.A.			\$8.75 Additional Fee Required
	market the material control of the c	nindario e il mandario e il mandario della compania della compania della compania della compania della compania	elektronia entelese		7. Name and Address	of Current Register	ed Agent
Name ROVALE					E. KOWALSKI		
DO NOT WRITE				Street Address (P.O. Box Number is Not Acceptable)			
IN THIS SPACE							
IN THIS STACE 1657 S.					PALMETTO AVE.		
					PYTONA	F	L Zip Code
	named entity submits this statement f	or the purpose of changing its	registered	office or registere	ed agent, or both, in the	State of Florida. I am	familiar with, and accept
the obligat	tions of registered agent.						
ź		*					
SIGNATURE .	Signature, typed or printed name of registered agen	and title if applicable (NOT	E: Boointared A	gent signature required	ubon voinstations)	DATE	
· * L		t and title it applicable. (NOT	c. negistered A		when remstating)		
7" January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00					9. Election Campaign Financing \$5.00 May Be		
Amended UBR is \$61.25					Trust Fund Contribution. Added to Fees		
State of the state	Payable to Florida Department of	et Pierre de la company de	■ 7455 A 574 5 A	and the state of the state of			The second of th
10.	OFFICERS AND	DIRECTORS		Profesional Company of the Company o			
TITLE	PSD		TITLE				
NAME	THOMAS J. HUGHES			中國學術。 医疗关节	The street was a second of the second	在中国的基本的 1995年 1996年 1	
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TITLE	30						
NAME	RUNALD E. KOWALSKI					AND THE STATE OF T	
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NAME

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SIGNATURE:

STREET ADDRESS

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CITY-ST-ZIP

NAME

TITLE

NAME STREET ADDRESS

RONNO E. YOUMSKI 3/30/03 (386)

^{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 on an attachment with an address, with all other like empowered.