FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State
05-02-2002 90119 004 ***150.00

DOCUMENT # P01000118747

1. Entity Name: Rome Auto Brokers Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1705 W. Arch street	1705 W. Arch street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa, Florida	City & State: Tampa, Florida
Zip: 33607 Country: U.S.A	Zip: 33607 Country: U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3760992 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Anthony C. Mirabella

Street Address (P.O. Box Number is Not Acceptable): 1705 W. Arch Street

City: Tampa Florida Zip Code: 33607

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: [signature] April, 20th 2002
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	President
NAME	Anthony Mirabella
STREET ADDRESS	1705 W Arch street
CITY-ST-ZIP	Tampa, Fl-33607-
TITLE	~~Pr~~ Vice President
NAME	Jennie Mirabella
STREET ADDRESS	1705 W. Arch street
CITY-ST-ZIP	Tampa, Fl-33607
TITLE	
NAME	
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CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(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.

Anthony Mirabella [signature] Jennie Mirabella [signature] 4-20-02 (813)258-9010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #