

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

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91789 005 ***150.00

DOCUMENT # 201000118747

1. Entity Name
Rome Auto Brokers Inc.
~~Dea Mirabella Motors~~



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1111 W. Kennedy Blvd
Suite, Apt. #, etc.

3. Mailing Address
Same
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Tampa Florida
Zip
33606

City & State
Zip
Country
U.S.A.

4. FEI Number
593760992

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 Mirabella
Street Address (P.O. Box Number is Not Acceptable)
1111 W. Kennedy Blvd
City Tampa **FL** **Zip Code** 33606

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 Anthony Mirabella President *[Signature]* 4-28-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when releasing) **DATE**

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$350.00
Amended UBR is \$61.25
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 President	TITLE	
NAME Anthony Mirabella	NAME	
STREET ADDRESS 1111 W. Kennedy Blvd	STREET ADDRESS	
CITY-ST-ZIP Tampa, FL-33606	CITY-ST-ZIP	
TITLE Vice President	TITLE	
NAME Jennie Mirabella	NAME	
STREET ADDRESS 1111 W. Kennedy Blvd	STREET ADDRESS	
CITY-ST-ZIP Tampa, FL-33606	CITY-ST-ZIP	
TITLE	TITLE	
NAME	NAME	
STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	
TITLE	TITLE	
NAME	NAME	
STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	
TITLE	TITLE	
NAME	NAME	
STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE: Anthony Mirabella President *[Signature]* 4-28-03 (813) 258-9010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2034B (12/02)