

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR) 2003**

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90147 020 ***150.00

DOCUMENT # **P02000003755**

1. Entity Name

AUTO US LENDERS INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2425 PEMBROKE RD

3. Mailing Address

2525 N STATE RD 7

Suite, Apt. #, etc.

Suite, Apt. #, etc.

115

City & State

HOLLYWOOD

City & State

HOLLYWOOD

Zip

33020

Country

US

Zip

33021

Country

US

4. FEI Number

30-0026763

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

STEVE Z LEVY

Street Address (P.O. Box Number is Not Acceptable)

2525 N STATE RD 7 - # 115

City

HOLLYWOOD

FL

Zip Code

33021

**DO NOT WRITE
IN THIS SPACE**

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

2/28/03

DATE

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

January 1 - May 1, Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**AD
ERAN ZMORA
801 SW 89 TER
PLANTATION, FL 33324**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: **(X)**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/03

DATE

954-926-7707

Daytime Phone #

CR2E034B (12/01)