

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

DOCUMENT # **P0200000710M**

1. Entity Name

Auto Magic of Daytona Inc



FILED

05 AUG 19 PH 1:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2106 OAK MEADOW CIR

3. Mailing Address

1515 Ridge wood Ave

City & State

South Daytona FL

City & State

Holly Hill FL

Zip

32119 USA

Zip

32117 USA

4. FEI Number

26-0014510

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JOE Loguidice

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

1515 Ridge wood Ave SEA

City

Holly Hill

FL

Zip Code

32117

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

Signature, typed or printed name of registered agent not required if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

JOE Loguidice 7/18/05

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

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
NAME **P Stevens Paul**
STREET ADDRESS
CITY - ST - ZIP **2106 oak meadow cir
South Daytona FL 32119**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**E00058850378
08/22/05-01067-004 \$300.00**

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JOE 8/19

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

2. 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 owner 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: **Paul Stevens**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/05

Date

Daytime Phone

Florida Department of State
Attn: (UBR 2005)
P O Box 6327
Tallahassee, FL 32314-6327

JULY 27, 2005

Dear Sir or Madam:

As per our conversation 07/26/05 with your office, this letter is to inform your office that

We never received report for the 2004 uniform business report. We sent in a letter changing our

mailing address when the office moved. Our office spoke with a

supervisor this person advised me to let your office know of the correct address.

Your office also said all penalty fees would be waved due to the problems our company had with the mailing address.

Furthermore, we got a letter saying the late fee was not waved; the Division of Corporations advised me to send this letter and all late fees would be waved as on the internet filing just mark the box saying the original form was never received and we never did get form and we and until September 1, 2005.

Please make the Correct changes to my records and file my corporation UBR from for 2005.

Thank you for your time in concerning this matter.

Sincerely,

AUTO MAGIC OF DAYTONA INC
2016 OAK MEADOW CIR
SOUTH DAYTONA FL 32119