

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90333 040 ***150.00

DOCUMENT # P02000046706

1. Entity Name
AUTO PROFITS-R-US INC.



Principal Place of Business
735 HUNT CLUB TRAIL
PORT ORANGE FL 32127

Mailing Address
735 HUNT CLUB TRAIL
PORT ORANGE FL 32127

2. Principal Place of Business

6115 SANCTUARY Garden BLVD
Suite, Apt. #, etc.

3. Mailing Address

6115 SANCTUARY Garden BLVD
Suite, Apt. #, etc.

City & State

Port Orange FL.

City & State

Port Orange FL.

4. FEI Number

45-0478580

Applied For

Not Applicable

Zip
32128

Country
Volusia

Zip
32128

Country
Volusia

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ECKERT, RAY
735 HUNT CLUB TRAIL
PORT ORANGE FL 32127

NEW address

7. Name and Address of New Registered Agent

Name

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

6115 SANCTUARY Garden BLVD.

Port Orange FL. 32128 FL

Zip Code
32128

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 RAY ECKERT

Signature, typed or printed name of registered agent and title if applicable.

Ray Eckert

NOTE: Registered Agent signature required when reinstating.

4/18/03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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 P
NAME ECKERT, RAY
STREET ADDRESS 735 HUNT CLUB TRAIL
CITY-ST-ZIP PORT ORANGE FL 32127 ☒ Delete

TITLE S
NAME FRYE, DAVENNE
STREET ADDRESS 6426 LONGLAKE DRIVE
CITY-ST-ZIP PORT ORANGE FL 32128 ☐ Delete

TITLE VP
NAME ECKERT, DEANNE
STREET ADDRESS 735 HUNT CLUB TRAIL
CITY-ST-ZIP PORT ORANGE FL 32127 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME ECKERT, RAY
STREET ADDRESS 6115 SANCTUARY Garden BLVD.
CITY-ST-ZIP Port Orange, FL, 32128 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME ECKERT, DEANNE
STREET ADDRESS 6115 SANCTUARY Garden BLVD.
CITY-ST-ZIP Port Orange, FL, 32128 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: RAY ECKERT **DATE:** 4/18/03 **DAYTIME PHONE #:** 386-788-8883

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/02)