

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 11, 2003 8:00 am**  
**Secretary of State**

05-02-2003 90110 049 \*\*\*150.00

0129910 AT

**DOCUMENT # P02000047101**

1. Entity Name  
**BILL'S CUSTOM AUTOMOTIVE, INC.**



Principal Place of Business  
**82760 OVERSEAS HWY  
ISLAMORADA FL 33036**

Mailing Address  
**82760 OVERSEAS HWY  
ISLAMORADA FL 33036**

**330360346**



2. Principal Place of Business  
**82760 Overseas Hwy**  
Suite, Apt. #, etc.

3. Mailing Address  
**82760 Overseas Hwy.**  
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State  
**Islamorada Fla.**  
Zip  
**33036** Country  
**MONROE**

City & State  
**Islamorada Fla.**  
Zip  
**33036** Country  
**MONROE**

4. FEI Number  
**421535248**

Applied For  
☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

**MIKLAS, JOE  
88765 OVERSEAS HWY  
TAVERNIER FL 33070**

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	<b>PD ISMER, WILLIAM E 82760 OVERSEAS HWY ISLAMORADA FL 33036</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:** LOUISIANA REGISTERED 8-18-03  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

Attachment

55056347  
P02000047101

William E. Ismer  
DBA Bill's Custom Automobile Inc.  
82760 Overpass Hwy.  
Delamarada, Fl. 33036

Document # P02000047101

Aug. 18, 2003

Division of Corporations  
Uniform Business Report Filing  
P.O. Box 1500

Tallahassee, Fl. 32302-1500

Dear Sir

Please find enclosed corrected application 2003  
UBR document # P02000047101 to replace <sup>form</sup> sent in  
error with incorrect current registered agent. Original  
was sent with William E. Ismer as registered agent.  
Should have been Joe Muklas address: 88765 Overpass Hwy,  
Tavernier, Fl. 33070, as shown on enclosed document.

The document filed incorrectly was sent with our  
check for \$306.00 which has been cashed by your  
office.

Thank you

Yours truly

William E. Ismer

