FILED Mar 28, 2003 8:00 am Secretary of State

0/05/03 (363)314-Z884.

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UNIFOR	M BUSINESS	REPORT	(UBR)

DOCUMENT # P02000082875 1. Entity Name HOMETOWN AUTO WHOLESALERS, INC.					03-10-2003 90)093 034 ** [,]	*150.00	
Principal Place of Business Mailing Address P. O. BOX 481 P. O. BOX 481 FRUITLAND PARK FL 34731-0481 FRUITLAND PARK FL 34731		4731-0481						
2. Principal F	2. Principal Place of Business 3. Mailing Address				T NOCKIODA IN OCHIO MIDII BONII OFINI SO	iik daede ideed ei boe j	BINT F ÉRTA BYET HERD	
Suite, Apt. #, etc. Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State City & State		City & State			4. FEI Number		Applied For Not Applicable	7
Zip	Country	Zip	Count	ry	5. Certificate of Status Desired	\$8.75 Fee Requ		7
	6. Name and Address of Current	Registered Agent.	- 1		7. Name and Address of New Regis			┪.
				Name				7
KEARINS, RICHARD T JR		· ·	Street Address (P.O. Box Number is Not Acceptable)				1	
	ND PARK FL 34731		}		····			7
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	e Pau		İ	City		FL Zip C	ode	1
	named entity submits this statement for tions of registered agent.	the purpose of changing it	s registere	d office or registe	ered agent, or both, in the State of Florida.	I am familiar wi	th, and accept	7
SIGNATURE .	Signature, typed or printed name of registered agent a	en e				· ··· · · · · · · · · · · · · · · · ·	- 14	
	Signature, typed or printed name of registered agent a	nd trie if applicable. (NO	It: Registered	Agent signature require	ad when reinstating)	DATE		4
	ILE NOW!!! FEE IS \$150.00	· 1		* "; ;	9. Election Campaign Financi	na \$ 5	An May Bo	,
	r May 1, 2003' Fee will be \$550.00 c Royable to Florida Department of	State	S ins	1	Trust Fund Contribution.	ື □_ <u>a, Ad</u> c	.00 May Be led to Fees	1
;10. >1 €. 1	OFFICERS AND I	A PART OF THE PART	111.		ADDITIONS/CHANGES TO OFFICER		**** ** *****	-
TITLE Common		☐ Delete	TITLE	• • •		☐ Chang		7 8
NAME	KEARNS, RICHARD T.JR.		NAME	ľ	•			Įğ
STREET ADDRESS	P. O. BOX 481		STREE	T ADDRESS				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
CITY-ST-ZIP	FRUITLAND PARK FL 84731-0481		CITY-S	ST-ZIP				
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STREET ADDRESS	4172 CR 510			T ADDRESS				1
CITY-ST-ZIP	WILDWOOD FL 34785-0481		CITY-	ST-ZIP				
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STREET ADDRESS					935 HIGHWAY 466			
CITY-ST-ZIP			CITY-S	SI-AP FR	WITLAND PARIC, FL	34+3)		4
TITLE NAME		Delete	TITLE			Change	Addition	
STREET ADDRESS			NAME	ADDRESS				
CITY-ST-ZIP			CITY-S					1
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STREET ADORESS	<u> </u>			ADDRESS	THE STATE OF THE SECOND	FV-7-37	r Bagailte	-
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NAME 533	i grand al arrango, di magnata na deuto. La resta esta del contra del cont		NAME	1000000	र जारावाहरू सुगारिकः वस्त है। सम्बन्ध	U 23	\$30 July B	
STREET ADDRESS.	on the second se		STREET CITY-S	ADDRESS			a and an incompany of the second	1
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indicated of the corp	on this report or supplemental report is to contain or the receiver or trustee emporation of the receiver or trustee emporation of the receiver of trustees emporation of trustees emporati	rue and accurate and that report	ne exem ny signatu as require	ipiion stated in Se re shall have the d by Chapter 607	ection 119.07(3)(i), Florida Statutes. I furth same legal effect as if made under oath; t 7, Florida Statutes; and that my name app	er certify that the hat I am an office ears in Block 10	anormation or director or Block 11 if	-