

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 06, 2003 8:00 am
Secretary of State

01-06-2003 90032 018 ***158.75

DOCUMENT # P02000083921

1. Entity Name
AMERICAN WAY AUTO SALES, INC.



Principal Place of Business

605 ROSEGATE LN
ORLANDO FL 32835
US

Mailing Address

605 ROSEGATE LN
ORLANDO FL 32835
US

2. Principal Place of Business

4910 W. COLONIAL DR.
Suite, Apt. #, etc.

3. Mailing Address

4910 W. COLONIAL DR.
Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA

City & State

ORLANDO, FLORIDA

4. FEI Number

61-142,2092

Applied For

Not Applicable

Zip 32808

Country US

Zip 32808

Country US

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEVITO, DAVID
605 ROSEGATE LN
ORLANDO FL 32835

7. Name and Address of New Registered Agent

Name DAVID DEVITO

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

4910 W. COLONIAL DR.

City ORLANDO

FL

Zip Code 32808

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 DAVID DEVITO
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 1/5/03

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 SUHWEIL, IZEDDIN
STREET ADDRESS 7867 CANYON LAKE CIRCLE
CITY-ST-ZIP ORLANDO FL 32835 ☐ Delete

TITLE ~~VR~~
NAME ~~DEVITO, DAVID~~
STREET ADDRESS ~~605 ROSEGATE LN~~
CITY-ST-ZIP ~~ORLANDO FL 32835~~ ☒ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P.D.
NAME IZEDDIN SUHWEIL
STREET ADDRESS 7867 CANYON CIRCLE
CITY-ST-ZIP ORLANDO, FLORIDA 32835 ☒ 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

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: Izeddin Suhweil
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/03 (407) 521-6800
Date Daytime Phone #

CR2E034 (10/02)