FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
03 AUG 18 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000100986

1. Entity Name
CARRILUOS AUTO ELECTRIC INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4719 SEA OATS CIRCLE	4719 SEA OATS CIRCLE
Suite, Apt. #, etc. APT 105	Suite, Apt. #, etc. APT 105
City & State WEST PALM BEACH, FL	City & State WEST PALM BEACH, FL
Zip 33417 Country USA	Zip 33417 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 16-1624695 — Applied For / Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name ERIC CARRILLO
Street Address (P.O. Box Number is Not Acceptable) 4719 SEA OATS CIRCLE
APT 105
City WEST PALM BEACH FL Zip Code 33016

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]
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	P/P	TITLE	
NAME	ERIC CARRILLO	NAME	
STREET ADDRESS	4719 SEA OATS CIRCLE APT 105	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33417	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	

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DO NOT WRITE IN THIS SPACE

CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] ERIC CARRILLO 7-16-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JT 8/18