

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


APPROVED
AND
FILED

03 MAY 20 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **PD2 000110060**

1. Entity Name
PREDOWNED MOTORS OF FLORIDA INC.



DO NOT WRITE IN THIS SPACE

300020421143

06/03/03--01047--017 **150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4190 Palm Beach Blvd.
Suite, Apt. #, etc.

3. Mailing Address
604 E 30st
Suite, Apt. #, etc.

City & State
Fort Myers FL

Zip
33916

Country
Lee

City & State
Hialeah FL

Zip
33013

Country
Dade

4. FEI Number
37-1448077

Applied For
☒ Not Applicable

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

7. Name and Address of Current Registered Agent

Name
Maria C. Cardoza

Street Address (P.O. Box Number is Not Acceptable)
604 E 30st

City
Hialeah FL

Zip Code
33013

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 **Maria C. Cardoza** (NOTE: Registered Agent signature required when resigning) DATE **5/14/03**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE President	NAME Maria C. Cardoza
STREET ADDRESS 604 E. 30st	
CITY- ST- ZIP Hialeah, FL 33013	
TITLE	NAME
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	NAME
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	NAME
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	NAME
STREET ADDRESS	
CITY- ST- ZIP	

DO NOT WRITE IN THIS SPACE

CR2E004B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(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: **Maria C. Cardoza** DATE **5/14/03** DAYTIME PHONE # **305 696-4695**

24
MAY 14, 2003

TO WHOM IT MAY CONCERN,

I HAVE JUST FOUND OUT THAT I WAS TO FILE AN ANNUAL REPORT FOR 2003 WITH YOUR OFFICE. DUE TO OUR MOVE I BELIEVE THAT WE HAVE NOT RECEIVED ANY NOTICE FOR PAYMENT. ENCLOSED PLEASE FIND A MONEY ORDER IN THE AMOUNT OF \$150.00 FOR PAYMENT AND ASK IF YOU COULD WAIVE THE PENALTY FEE. WE HAVE UPDATED OUR ADDRESS ON THE FORM.

I THANK YOU FOR YOUR TIME AND CONSIDERATION.

SINCERELY,

MARIA C. CARDOZA