

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 11, 2004 8:00 am**  
**Secretary of State**

05-11-2004 90075 010 \*\*\*150.00

**DOCUMENT # P04000006318**

1. Entity Name

AEA AUTO BROKERS, INC.



Principal Place of Business

757 SE 17TH STREET #732  
FT. LAUDERDALE FL 33316-2960

Mailing Address

757 SE 17TH STREET #732  
FT. LAUDERDALE FL 33316-2960

2. Principal Place of Business

500 SE ~~ST~~ 32 CT.

Suite, Apt. #, etc.

3. Mailing Address

500 SE 32 CT.

Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

FT. LAUDERDALE, FL

Zip

33316

Country

USA

City & State

FT. LAUDERDALE, FL

Zip

33316

Country

USA

4. FEI Number

20-0612272

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

KUPFERMAN, SCOTT M  
757 SE 17TH STREET #732  
FT. LAUDERDALE FL 33316-2960

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004: 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 PS  
NAME KUPFERMAN, SCOTT M ☒ Delete  
STREET ADDRESS 757 SE 17TH STREET #732  
CITY-ST-ZIP FT. LAUDERDALE FL 33316-2960

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRES. / SEAT  
NAME JOEL KUPFERMAN ☐ Change ☒ Addition  
STREET ADDRESS 4310 SHERIDAN ST. # 202  
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE DIRECTOR  
NAME SCOTT M. KUPFERMAN ☒ Change ☐ Addition  
STREET ADDRESS 757 SE 17TH ST. # 732  
CITY-ST-ZIP FT. LAUDERDALE, FL 33316-2960

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JOEL KUPFERMAN - PRES 4/20/04 954-961-1040