P09000014368

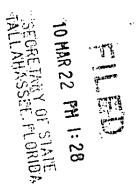
(Re	questor's Name)	
(Ad	dress)	
, (Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
		1





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03/22/10--01006--025 **87.50



RA Resign C.COULLIETTE

MAR 2 3 2010

EXAMINER

COVER LETTER

Division of Corpora		
SUBJECT: Universal Aut	o Import & Export Inc	
SUBJECT: Officer Add	(Name of Corporation)	
DOCUMENT NUMBER:		
	f Registered Agent for a Corporation and fee are submitted for filing.	
Please return all correspond	ence concerning this matter to the following:	
Nader Zayer		
(Nam-	e of Person)	
(Name of	Firm/Company)	
512 Adirondack Ave		
(A	Address)	
Orlando,FL.32807	ي تصريبي بين مست به دريو د يواه د د د د مستوي د موه د د د د د د د د د د د د د د د د د د د	٠
(City/State	e and Zip Code)	
For further information con-	cerning this matter, please call:	
Nader Zayer	at (407) 443-1113 (Area Code & Daytime Telephone Number)	
(Name of Per	son) (Area Code & Daytime Telephone Number)	
Enclosed is a check made pa or \$35.00 for an administrat	ayable to the Florida Department of State for \$87.50 for an active corporation ively dissolved, voluntarily dissolved or withdrawn corporation.	on
Street Address:	Mailing Address:	

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617	.1509,
Florida Statutes, the undersigned, Na	der Zayer	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	Universal Auto Import & Export, Inc	
	(Name of Corporation)	
P09000014368		
(Document Number, if known)		
A copy of this resignation was mailed to	o the above listed corporation at its last kno	own address.
this statement is filed.	discontinued on the 31st day after the date	on which
If signing on behalf of an entity:		10 MAR 22
(Typed or Printed Name)	22 PH I: SSEE, FLO
	(Capacity)	28

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314