2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State
05-23-2001 91178 034 ***150.00

A0071518

DO NOT WRITE IN THIS SPACE

DOCUMENT # P93 00000 8668

1. Entity Name: OVERSEAS AUTO BROKERS, INC

Principal Place of Business	Mailing Address
3332 PALM BEACH BLVD	1505 SW 30 ST Cape Coral, FL 33990

2. Principal Place of Business	3. Mailing Address
3332 PALM BEACH BLVD	1505 SW 31 ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FT MYERS, FL	City & State: Cape Coral, FL
Zip: 33916 Country: USA	Zip: 33990 Country: USA

4. FEI Number: 65-0388786 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LARRY RUDOLF
1505 SW 30 ST
Cape Coral, FL 33990

7. Name and Address of New Registered Agent

Name: LARRY RUDOLF
Street Address (P.O. Box Number is Not Acceptable): 1505 SW 30 ST
City: Cape Coral **FL** Zip Code: 33990

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.

SIGNATURE: [signature] LARRY RUDOLF 4/30/01
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! Fee is $150.00 After MAY 1, 2001 Fee will be $550.00 Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MURRAY RUDOLF, 1505 SW 30 ST, Cape Coral, FL 33990 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Both ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (11/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] MURRAY RUDOLF 4/30/01 (941) 826-7970 / 540-3415
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone