2000 UNIFORM BUSINESS REPORT (UBR)

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

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED DOCUMENT # P93000013267 Feb 03, 2000 8:00 am **Secretary of State** NU-WAY AUTO SERVICE, INC. 02-03-2000 90034 028 ***150.00 Mailing Address Principal Place of Business 551 NW 71 STREET 551 NW 71 STREET MIAMI FL 33150-3751 MIAMI FL 33150 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0472798 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required -7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent-Name MILLER, DAVID E Street Address (P.O. Box Number is Not Acceptable) 551 N.W. 71ST ST. **MIAMI FL 33150** 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Delete TITLE TITLE NAME MILLER, DAVID STREET ADDRESS STREET ADDRESS 551 N.W. 71ST ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33127 Addition ☐ Delete ☐ Change TITLE TITLE. NAME MILLER, WALLY NAME STREET ADDRESS STREET ADDRESS 551 N.W. 71ST ST. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33127** ☐ Change ☐ Addition ☐ Delete TITLE TITLE MILLER, WALTER NAME STREET ADDRESS STREET ADDRESS 551 N.W. 71ST ST. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33127** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME MILLER, LAURA E NAME STREET ADDRESS STREET ADDRESS 4365 NORTH MERIDIAN AVENUE CITY-ST-7IP CITY-ST-ZIP MIAMI BEACH FL 33140 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE 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