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05-17-2002 90035 011 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
P93000085428

02 JUL -9 PM 2:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000085428

1. Entity Name

D.S.P. Auto Sales Inc.

DO NOT WRITE IN THIS SPACE

37791

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4301 S. Pine Ave	9355 Sunset Harbor Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ocala, Fl.	City & State: Summerfield Fl.
Zip: 34474 Country: Marion	Zip: 34491 Country: Marion

4. FEI Number: 59-3214240 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Dee Richard Taylor Jr.

Street Address (P.O. Box Number is Not Acceptable): 9355 Sunset Harbor Rd

City: Summerfield FL Zip Code: 34491

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: X Dee Richard Taylor Jr. 4-11-02

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) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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

TITLE: President NAME: Dee Richard Taylor Jr STREET ADDRESS: 9355 Sunset Harbor Rd. CITY-ST-ZIP: Summerfield Fl. 34491	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: Vice President NAME: Cynthia James Taylor STREET ADDRESS: 9355 Sunset Harbor Rd. CITY-ST-ZIP: Summerfield Fl. 34491	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: Secretary NAME: Crystal L Lovejoy STREET ADDRESS: 9355 Sunset Harbor Rd CITY-ST-ZIP: Summerfield Fl. 34491	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
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4/11/02

CR2E034B (12/01)

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

SIGNATURE: X Dee Richard Taylor Jr. 4-11-02

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR — Date — Daytime Phone #