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## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 07, 2002 8:00 am Secretary of State DOCUMENT # P94000008728 1. Entity Name 02-07-2002 90071 022 \*\*\*150 00 L & L AUTO SERVICE, INC. Principal Place of Business Mailing Address 41 SE BEAL PKWY 41 SE BEAL PKWY FORT WALTON BEACH FL 32548 FORT WALTON BEACH FL 32548 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3222789 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WILKS, L. JACK JR. Street Address (P.O. Box Number is Not Acceptable) 41 SE BEAL PKWY FORT WALTON BEACH FL 32548 City Zip Code 8. The above send patitive whole this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. SIGNATURE FILE NÓW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME WILKS, L. JACK JR. STREET ADDRESS 41 SE BEAL PKWY STREET ADDRESS CITY-ST-ZIP FORT WALTON BEACH FL CITY-ST-ZIP TITLE Change ☐ Addition TITLE Delete NAME WILKS, MARLO A NAME STREET ADDRESS STREET ADDRESS 41 SE BEAL PKWY CITY-ST-7IP CITY-ST-ZIP FORT WALTON BEACH FL TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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.