

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 01, 2002 8:00 am**  
**Secretary of State**

07-01-2002 90352 040 \*\*\*150.00

DOCUMENT # P 94000041641

1. Entity Name

Exclusive Auto, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

5201 NW 35 CT

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, Florida

City & State

4. FEI Number

65-0491801

Applied For

Not Applicable

Zip

33142

Country

USA

Zip

Country

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

FALCON, JOSE

Street Address (P.O. Box Number is Not Acceptable)

100 SW 124 Ave

City

MIAMI

FL

Zip Code

33184

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, typed or printed name of registered agent and file 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.

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$81.25

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	PDS
NAME	FALCON, JOSE
STREET ADDRESS	100 SW 124 Ave
CITY-STATE-ZIP	MIAMI - FLA - 33184
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 lines empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jose Falcon

6-21-02

Date

305-635-2166

305-887-4185

Daytime Phone #

CR2E034B (12/01)

*Attachment*  
*# P94000041041*  
*118761*

Exclusive Auto Inc.  
5201 NW 35 Court  
Miami, Florida 33142  
305-635-2766

June 24, 2002

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To whom it may concern:

This letter is to advise you that the reason why I have not mailed in my Business Report is because I never received it in the mail. Attached please find the report that I downloaded from the web along with my \$150.00 check. Thank you.



Jose Falcon