2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2000 8:00 am
Secretary of State
01-22-2000 90008 034 ***150.00

DOCUMENT # P94000043672

1. Entity Name

GAGEL'S AUTO SALES, INC.

Principal Place of Business	Mailing Address
804 HIGHWAY 574 EAST SEFFNER FL 33584	804 HIGHWAY 574 EAST SEFFNER FL 33584

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
804 E. M.L.K. Blvd.	804 E. M.L.K. Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Seffner, Fl 33584	City & State: Seffner, Fl
Zip: 33584 Country: Hillsborough	Zip: 33584 Country: Hillsborough

4. FEI Number 59-3247328 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GAGEL, MICHAEL T
6609 SOUTH 78TH ST.
RIVERVIEW FL 33569

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable) 6701 South 78th St.
City Riverview FL Zip Code 33569

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 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, 2000 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	P GAGEL, MICHAEL T 804 MLK BLVD HWY 574 EAST SEFFNER FL 33584	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 804 E. M.L.K. Blvd.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPST GAGEL, SHARI S 804 MLK BLVD HWY 574 EAST SEFFNER FL 33584	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 804 E. M.L.K. Blvd.
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CR2E034 (9/99)

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] 01-10-00 813-643-1888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #