## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## P95000021454 DOCUMENT #

1. Entity Name

CAR PLAZA OF HOLLYWOOD, INC.



Principal Place of Business Mailing Address 401 N 60TH AVE 8360 W OAKLAND POSH BLVD 11064061 HOLLYWOOD FL 33021 SUNRISE FL 33351 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 65-0577817 Not Applicable 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 MREJEN, ARIE P.A. Street Address (P.O. Box Number is Not Acceptable) 701 W CYPRESS CREEK RD SUITE 302 FT LAUDERDALE FL 33309 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE 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 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition ☐ Delete TITLE Change YARNELL, KIETH NAME 2150 N W 12TH ST STREET ADDRESS **DELRAY BEACH FL 33445** CITY-ST-ZIP Change Addition Delete TITLE KADOCH, DAVID NAME 8360 W. OAKLAND PARK BLVD. #201 STREET ADDRESS SUNRISE FL 33351 CITY-ST-7iP DT ☐ Change □ Delete TITLE ☐ Addition ZOUR, ISRAEL NAME 12700 BISCAYNE BLVD. #202 STREET ADDRESS N. MIAM? FL CITY-ST-ZIP **VD** Delete TITLE Change ☐ Addition MENDIOLA, JOSE 1431 SW 82ND AVENUE STREET ADDRESS PLANTATION FL CITY-ST-ZIP DV Delete TITLE ☐ Change Addition BEN HORIN, YEHUDA 21321 N E 19TH AVE STREET ADDRESS NORTH MIAMI BEACH FL 33179 CITY-ST-ZIP ☐ Delete Change TITLE Addition NAME STREET ADDRESS

## **FILED** Apr 28, 2003 8:00 am Secretary of State

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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAAAF STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

12. Thereby 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered,

SIGNATURE:



ZOUR