

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 27, 2000 08:00 AM**  
**Secretary of State**

**DOCUMENT # P95000064489**

1. Entity Name

AUTO BY INTERNET, INC.

Principal Place of Business

110 SE 6TH STREET  
20TH FLOOR  
FT. LAUDERDALE  
33301

US

FL

Mailing Address

110 SE 6TH STREET  
20TH FLOOR  
FT. LAUDERDALE  
33301

US

FL

2. Principal Place of Business

Suite, Apt. #, etc.

City &amp; State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Zip

Country

4. FEI Number

65-0605532

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S PINE ISLAND ROADPLANTATION  
33324

US

FL

## 7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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)

04/27/2000

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

TITLE	T	<input type="checkbox"/> Delete
NAME	HYLE KATHLEEN	
STREET ADDRESS	110 SE 6TH STREET, 20TH FLOOR	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	P	<input type="checkbox"/> Delete
NAME	EGAN MICHAEL S	
STREET ADDRESS	333 EAST LAS OLAS BLVD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	DVS	<input type="checkbox"/> Delete
NAME	COLE JAMES O	
STREET ADDRESS	110 SE 6TH STREET, 20TH FLOOR	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	D	<input type="checkbox"/> Delete
NAME	HAWKINS THOMAS W	
STREET ADDRESS	110 SE 6TH STREET, 20TH FLOOR	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOURHIS MARC L	
STREET ADDRESS	110 SE 6TH STREET, 20TH FLOOR	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EGAN MICHAEL S	
STREET ADDRESS	110 SE 6TH STREET, 20TH FLOOR	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	DVS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRANDO JONATHAN P	
STREET ADDRESS	110 SE 6TH STREET, 20TH FLOOR	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAROONE MICHAEL E	
STREET ADDRESS	110 SE 6TH STREET, 20TH FLOOR	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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.

SIGNATURE: JONATHAN P. FERRANDO

04/27/2000