

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000070713

1. Entity Name

TOLEDO AUTOMOTIVE, INC.

**FILED**  
May 11, 2001 8:00 am  
Secretary of State

05-11-2001 90067 033 \*\*\*150.00

Principal Place of Business

1765 WEST 32 PLACE  
HIALEAH FL 33012  
US

Mailing Address

1765 WEST 32 PLACE  
HIALEAH FL 33012  
US

2. Principal Place of Business

X TOLEDO AUTOMOTIVE INC  
Suite, Apt. #, etc. 3655 W 16 AVE  
# 3+4

3. Mailing Address

X 3655 W 16 AVE  
Suite, Apt. #, etc. # 3+4

City & State

HIALEAH, FL

City & State

HIALEAH, FL

Zip

33012

Country

DADE

Zip

33012

Country

DADE



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0608547

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

TOLEDO, ENRIQUE  
7945 INDIGO STREET  
MIRAMAR FL 33023

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

X ENRIQUE TOLEDO Pres 4-25-01

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. ☐

**FILE NOW!!! FEE IS \$150.00**

**After MAY 1, 2001 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 PD ☐ Delete  
NAME TOLEDO, ENRIQUE  
STREET ADDRESS 1765 WEST 32 PLACE  
CITY-ST-ZIP HIALEAH FL 33012

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ENRIQUE TOLEDO Pres 4-25-01 305-820-3004

Date

Daytime Phone #

CR2E034 (10/00)