

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000025512

1. Entity Name
AUTO TITLE LOAN STORES, INC.

FILED
Feb 28, 2001 8:00 am
Secretary of State
02-28-2001 90079 045 ***150.00

020106



DO NOT WRITE IN THIS SPACE

Principal Place of Business
20302 S DIXIE HWY
MIAMI FL 33189

Mailing Address
20302 S DIXIE HWY
MIAMI FL 33189

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0239298

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HERSH, BRIAN R
19 WEST FLAGLER STREET
SUITE 602
MIAMI FL 33130-4477

Name Mickey Gottlieb

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

20302 S. Dixie Hwy

City Miami

FL

Zip Code 33189

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 *Mickey Gottlieb*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/31/01

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME GOTTLIEB, MICKEY
STREET ADDRESS 20302 SOUTH DIXIE HIGHWAY
CITY-ST-ZIP MIAMI FL 33189 ☐ Delete

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

TITLE ST
NAME GOTTLIEB, MICKEY
STREET ADDRESS 20302 SOUTH DIXIE HIGHWAY
CITY-ST-ZIP MIAMI FL 33189 ☒ Delete

TITLE ST
NAME GALLANDER, MICHAEL
STREET ADDRESS 20302 S. Dixie Hwy
CITY-ST-ZIP Miami, FL 33189 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE VP
NAME COTELESE, MICHAEL
STREET ADDRESS 20302 S. Dixie Hwy
CITY-ST-ZIP MIAMI, FL 33189 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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: *Mickey Gottlieb*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/31/01 (305) 233 1130
Date Daytime Phone #

CR2E034 (10/00)