2001
~~2000~~ **UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 20, 2001 8:00 am
Secretary of State
04-20-2001 90028 021 ***150.00

DOCUMENT # P96000058083

1. Entity Name

AUTO RECOVERY SERVICE, INC.

a. Place of Business	Mailing Address
~~2550 SOUTH PARK ROAD~~ ~~PEMBROKE PARK FL 33009~~ ~~US~~	~~2550 SOUTH PARK ROAD~~ ~~PEMBROKE PARK FL 33009-3814~~ ~~US~~

C0049830

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
460 N. SR 7	P.O. BOX 120277
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PLANTATION FL	City & State: PLANTATION FL
Zip: 33317 Country: US	Zip: 33312 Country: US

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LONDON, MARK S
4030-C SHERIDAN STREET
HOLLYWOOD FL 33021

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 of new registered agent (if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

9. The corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐ (See other side)

FILE NOW! FEE IS $150.00 ONLY
After MAY 1, 2001 Fee will be $400.00
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	
	PT GARNER, BILL M ~~2550 S PARK RD~~ ~~PEMBROKE PARK FL 33009~~ ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES/S/D GARNER, BILL M P.O. BOX 120277 PLANTATION FL 33312 0277 ☒ Change ☐ Addition
	VP HURST, DOUG ~~2550 S. PARK RD~~ ~~PEMBROKE PARK FL 33009~~ ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/P/D HURST, DOUGLASS P.O. BOX 120277 PLANTATION FL 33312 0277 ☒ Change ☐ Addition
	~~S~~ ~~KURTH, CAROL~~ ~~2550 S. PARK~~ ~~PEMBROKE PARK FL 33009~~ ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	~~Change~~ ☐ Addition
	T HURST, JULIE 2550 SOUTH PARK ROAD PEMBROKE PARK FL 33009 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/P HURST, JULIE P.O. BOX 120277 PLANTATION FL 33312 0277 ☒ Change ☐ Addition
	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
	☐ 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 above or on an attachment with an address, with all other like empowered.

Signature 4/20/00 954-987-7676