

FILED

Aug 01, 2001 8:00 am
Secretary of State

08-01-2001 90201 050 ***550.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000064921

1. Entity Name

Preferred Vehicle Lease, Inc.

Principal Place of Business

Mailing Address

19206 US HWY 19 North, Ste. B
Clearwater, Florida 34624

Same

C0074697

2. Principal Place of Business

P.O. Box 5812
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 5812
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Clearwater, Fl.

City & State

Clearwater, Fl.

4. FEI Number

593417387

Applied For

Not Applicable

Zip

Country

33758-5812

USA

Zip

Country

33758-5812

USA

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Louis Bakkalapulo, P.A.
111 North Belcher Road, Ste. 201
Clearwater, Florida 33765

7. Name and Address of New Registered Agent

Name
Louis Bakkalapulo, P.A.Street Address (P.O. Box Number is Not Acceptable)
111 North Belcher Road

Suite 201

City

Clearwater, FL

FL

Zip Code
33765

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 re-registering)

DATE

7/30/01

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)☐10. Election Campaign Financing
Trust Fund Contribution.☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President/Secretary ☐ Delete
Treasurer
Maria Kastrenakes
221 Turner St.
Clearwater, Florida 34616 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President ☐ Change ☒ Addition
Michael Kastrenakes PO Box 5812
Clearwater, Fl. 33758-5812TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete ☐ Change ☐ Addition

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President/Secretary ☒ Change ☐ Addition
Treasurer
Clearwater, Fl.
Maria Kastrenakes PO Box 5812,TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President ☐ Change ☒ Addition
Michael Kastrenakes PO Box 5812
Clearwater, Fl. 33758-5812TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
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)(f), 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 filers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael Kastrenakes, VP

7/30/01

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CR2E034 (11/00)