03 MAY -1 PM 3:28

## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # 197000008179** 

1. Entity Name

DEL RICA AUTO SALES, INC.



LANDERHILL FL 33313  LANDERHILL FL 33313  LANDERHILL FL 33313  2. Principal Pace of Business  Surie, Apl. #. etc.  Surie, Apl. #. etc.  Surie, Apl. #. etc.  Cry & State  Cry		·	-	19.3		SECRETARY OF STATE	
Suria, Apl #, etc.  Suria, Apl #, etc.  Suria, Apl #, etc.  Suria, Apl #, etc.  City & State  City & State  City & State  Country  Zip  Country  Size Country  Size Country  Size Country  Size April 2, 22, 22, 22, 22, 23, 23, 23, 23, 23,	2029 NW 46th AVE 403D 2029 NW 46					SECRETARY OF STATE TALLAHASSEE. FLORIDA	
City & State  Ci	2. Principal Place of Business		3. Mailing Address			]	
Signature   Sign	Suite, Apt. #. etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES	
S. Name and Address of Current Registered Agent  GRAY, VANESSA 2029 NW 46th AVE 403D LANDERHILL FL 33313  City FL Zp 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. I am familiar with, and acc the obligations of registered agent are registered agent, or both, in the State of Florida. I am familiar with, and acc the obligations of registered agent are registered agent, or both, in the State of Florida. I am familiar with, and acc the obligations of registered agent a	City & State		City & State				
STRET ADDRESS OF THE PROPERTY	Zíp	Country	Zip	Country			
Street Address (P.O. Box Number is Not Acceptable)  LAUDERHITLL FL 33313  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. I am lamiliar with, and acceptable)  Signature Sequence agent agent with the State of Florida. I am lamiliar with, and acceptable of Proceeds agent ag		6. Name and Address of Current I	Registered Agent			7. Name and Address of New Registered Agent	
LAUDERHILL FL 33313  City FL ZP Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and acc the obligations of registered agent.  SIGNATURE  FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00!  Make Check Texplate to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  THE ORAN, VANES SA STREET ADDRESS CITY-SI-ZP  THE NAME  STREET ADD				Name			
E. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accidented bygoines of registered agent, or both, in the State of Florida. I am familiar with, and accidented bygoines agent and the subjective support of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accidented by the purpose of preparated agent.  SIGNATURE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  THE MAME  GRAY, VANESSA  SIRETADORISS  CITY-S1-2P  OFFICERS AND DIRECTORS IN 12  CITY S1-2P  OFFICERS AND DIRECTORS IN 12  CITY S1-2P  OFFICERS AND DIRECTORS IN 12  CITY-S1-2P  OFFICERS AND DIRECTORS IN 13  CITY-S1-2P  OFFICERS AND DIRECTORS IN 12  CITY-S1-2P  OFFICERS AND DIRECTORS IN 13  ADDITIONS/OHANGES TO CITY-S1-				Street	Address (P.	P.O. Box Number is Not Acceptable)	
8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accident the obligations of registered agent.  SIGNATURE  Spathe hydror or printed name of registered agent and the it applicable.  (NOTE Progression Agent signature incurred when remaining)  Affice Now!!! FEE IS \$150.00  Affice Now!! Fee Is		h= =					
THE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00 State  Altor May 1, 2003 Fee will be \$550.00 State  Altor May 1, 2003 Fee will be \$550.00 State  Altor May 1, 2003 Fee will be \$550.00 State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT II.  THE  PD  GRAY, VANESS A  STREET ADDRESS  CITY-ST-2P  TILE  AMME  STREET ADDRESS  CITY-ST-2P  TILE  NAME  STREET ADD				( '		F6. [ '	
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TITLE	Afte	r May 1, 2003 Fee will be \$550.00	State			<del>_</del> <del>_</del> <del>_</del> <del>_</del> <del>_</del> <del>_</del> <del>_</del> <del>_</del> <del>_</del>	
NAME   STREET ADDRESS   2029 NW 46th AVE 403D   STREET ADDRESS   CITY-ST-ZP   CTANGE   CTAN	10.		DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
STREET ADDRESS   2029 NW 46th AVE 403D   STREET ADDRESS   CITY-ST-2P	TITLE		☐ Delete	TITLE	7	☐ Change ☐ Addition	
TITLE	STREET ADDRESS	2029 NW 46th AVE	_	STREET ADDRESS		300018454833 05/07/02-01021010 *******	
NAME   STREET ADDRESS   CITY - ST - ZIP		LAUDERHILL FL 333		<del></del>	<del> </del>		
NAME   STREET ADDRESS   CITY-ST-ZIP   CTANGE   Add	NAME STREET ADDRESS		∟J Delete	NAME STREET ADDRESS		☐ Change ☐ Addition	
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NAME STREET ADDRESS CITY - ST - ZIP CITY - ST	NAME STREET ADDRESS		☐ Delete	NAME STREET ADDRESS		☐ Change ☐ Addition	
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12   hereby cartly that the information symplicid with this filling does not qualify for the examplion system in Section 110 07/29/9   Florida Statutes   Livether cartly that the information symplectic that the information	NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	

receipt verify that the information supplied with this lifting 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE AND TYPED ON PRINTING NAME OF SIGNING OFFICER OR DIRECTOR