

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

**FILED**  
**Jun 13, 2002 8:00 am**  
**Secretary of State**

06-13-2002 90386 008 \*\*\*158.75

DOCUMENT # **297000009085**

1. Entity Name

**Image Auto, Inc**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**4613 University Dr**  
Suite, Apt. #, etc.  
**# 361**

3. Mailing Address

**4613 University Dr.**  
Suite, Apt. #, etc.  
**# 361**

DO NOT WRITE IN THIS SPACE

City & State

**Coral Springs, FL**

City & State

**Coral Springs, FL**

4. FEI Number

**65-0765438**

Applied For

Not Applicable

Zip

**33067**

Country

**U.S.**

Zip

**33067**

Country

**U.S.**

5. Certificate of Status Desired **X**

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**DAVID LAUZ**

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

**9528 N.W. 52 CT**

City

**Coral Springs**

FL

Zip Code

**33076**

**DO NOT WRITE  
IN THIS SPACE**

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 reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**P/T, S/D, C/M**  
**DAVID LAUZ**  
**9528 N.W. 52 CT Coral Springs**  
**FL 33076**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

**Image Auto, Inc.**

4613 University Drive #361  
Coral Springs, FL 33067

Attachment  
# P97088809085  
128143

June 9, 2002

To Whom It May Concern:

I have recently changed my business address and have not received my 2002 Uniform Business Report. I have downloaded the UBR from Sunbiz.Org. and have filled it out reflecting my business address.

Enclosed, please find a check in the amount of \$158.75 for the renewal of the corporation.

Sincerely,

  
David Lanzi