

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000023313

1. Entity Name
Specialty Automotive & Transmissions, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 16 PM 12:12

Principal Place of Business
3958 NE 5th Ave
Oakland Park, FL
33334

Mailing Address
3958 NE 5th Ave
Oakland Park, FL
33334

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0734898

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Hansen, Ronald P
534 NE 43rd Street
Oakland Park, FL 33334

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

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

FILE FROM FEE IS \$150.00
After MAY 1, 2001 Fee will be \$250.00
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	D	<input type="checkbox"/> Delete
NAME	COWART Stephen	
STREET ADDRESS	3958 NE 5th Avenue	
CITY-ST-ZIP	Oakland Park, FL 33334	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

000004652000
-10/25/01--01030--009
****150.00 ****150.00

10/24

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:

Stephen Cowart STEPHEN COWART PRESIDENT

10-8-01

954-566-6547

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)



ERIC FILKINS, CPA
CERTIFIED PUBLIC ACCOUNTANT

October 8, 2001

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Administrative Dissolution
Specialty Automotive & Transmissions, Inc.
Document No., P97000023313

Dear Sir or Madam:

Please reinstate Specialty Automotive & Transmissions, Inc. Steve Cowart (Owner) is known to me as a man of integrity, and has informed me that he did not receive the 2001 Uniform Business Report. In addition, Mr. Cowart has been suffering severe health problems this year. The health issues unfortunately take up a great deal of his time and attention. If the health issues are a determining factor, Mr. Cowart will be happy to supply supporting documentation from his Doctor.

Enclosed are the 2001 Uniform Business Report and a check for \$150.00. Please accept these as timely filed due to the reasonable causes noted above, and notify the taxpayer of the updated status of the corporation.

Sincerely,

Eric Filkins, CPA