FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an

Apr 02, 2001 8:00 am Secretary of State DOCUMENT# P97000029741 TROPHY CAR SERVICE, INC. 04-02-2001 90048 029 ***150.00 Principal Place of Business - 1. Mailing Address 8211 SW 9TH STREET P O BOX 460241 N. LAUDERDALE FL 33068 FT LAUDERDALE FL 33346 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 65-0736480 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LIEBERMAN, EUGENE M Street Address (P.O. Box Number is Not Acceptable) 8211 SW 9TH STREET N. LAUDERDALE FL 33068 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. TITLE ☐ Delete TITLE Change ☐ Addition NAME LIEBERMAN, EUGENE M NAME STREET ADDRESS STREET ADDRESS 8211 SW 9TH STREET CITY-ST-ZIP CITY-ST-ZIR N. LAUDERDALE FL 33068 ☐ Delete TITLE ☐ Change Addition TITLE NAME LIEBERMAN, ROSALEE H NAME STREET ADDRESS STREET ADDRESS 8211 SW 9TH STREET CITY-ST-ZIP CITY-ST-ZIP N. LAUDERDALE FL 33068 TITLE ☐ Delete TITLE Addition NAME LIEBERMAN, EUGENE M NAME STREET ADDRESS STREET ADDRESS 8211 SW 9TH ST CITY-ST-ZIP CITY-ST-7IP N LAUDERDALE FL 33068 TITLE Delete TITLE ☐ Change Addition NAME LIEBERMAN, ROSALEE H NAME STREET ADDRESS STREET ADDRESS 8211 SW 9TH ST CITY-ST-ZIP CITY-ST-ZIP N LAUDERDALE FL 33068 TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 of 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 repetiver or trustee empeyed by 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 affat meet with an affates.

like empowered.