

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90194 046 ***150.00

DOCUMENT # P97000075759

1. Entity Name

WHOLESALE AUTO UPHOLSTERY INC.

Principal Place of Business

**2088 B N. MILITARY
WEST PALM BEACH FL 33409
US**

Mailing Address

**2088-B N. MILITARY TRAIL
WEST PALM BEACH FL 33409
US**

2. Principal Place of Business

2360 N Military Trail

3. Mailing Address

2360 N Military Trail

Suite, Apt. #, etc.

Suite 112

Suite, Apt. #, etc.

Suite 112

City & State

West Palm Beach

City & State

West Palm Beach

Zip

33409

Country

US

Zip

33409

Country

US

4. FEI Number

65-0782876

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WARNER, DANIEL E
12289 85TH ROAD NORTH
WEST PALM BEACH FL 33412**

Name

WARNER, DANIEL E

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

2360 N Military Trail Ste 112

City

West Palm Beach

FL

Zip Code

33409

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

DANIEL E WARNER

4/25/01

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)

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 **P** ☐ Delete
NAME **WARNER, DANIEL E**
STREET ADDRESS **2088-B N. MILITARY TRAIL**
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE **P** ☒ Change ☐ Addition
NAME **WARNER, DANIEL E**
STREET ADDRESS **2360 N Military Tr Ste 112**
CITY-ST-ZIP **West Palm Beach, FL 33409**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/01

Date

561-684-7511

Daytime Phone #

CR2E034 (10/00)