

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000077324

1. Entity Name

AUTO & TRUCK SALES, SERVICE, USED AUTO PARTS, IN

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90050 003 ***150.00

Principal Place of Business

Mailing Address

731 N. DIXIE HIGHWAY
LAKE WORTH FL 33460

731 N. DIXIE HIGHWAY
LAKE WORTH FL 33460-2526

2. Principal Place of Business

1011 6TH AVE S.

3. Mailing Address

P.O. Box 19128

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Lake Worth FL

City & State

West Palm Beach FL

4. FEI Number

65-0778789

Applied For

Not Applicable

Zip

33460

Country

USA

Zip

33416

Country

USA

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

MESSINA, KELLIE E
731 N. DIXIE HWY
LAKE WORTH FL 33460

Name

ERSKINE, Rogers III PA

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

1903 Australian Ave South Suite A

City

W. 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

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

registered Agent

(NOTE: Registered Agent signature required when reinstating)

DATE

2-22-00

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, 2000 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 ☐ Delete
NAME P
STREET ADDRESS MESSINA, KELLIE E
CITY-ST-ZIP 731 N. DIXIE HIGHWAY
LAKE WORTH FL 33460

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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:

KELLIE E MESSINA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/00

Date

561-582-7474

Daytime Phone #

CR2E034 (9/99)