

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000079603

1. Entity Name

MOTOR CAR CONCEPTS II, INC.

FILED
Sep 11, 2000 8:00 am
Secretary of State

09-11-2000 90015 027 ***550.00

Principal Place of Business

302 S KIRKMAN RD
ORLANDO FL 32811

Mailing Address

302 S KIRKMAN RD
ORLANDO FL 32811

80105524



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

302 S. KIRKMAN Rd

3. Mailing Address

302 S. KIRKMAN Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO, FL

City & State

ORLANDO, FL

4. FEI Number

59-3468462

Applied For

Not Applicable

Zip

32811

Country

USA

Zip

32811

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OZDEMIR, HAKAN
1508 HIGH GROVE WAY
ORLANDO FL 32818

7. Name and Address of New Registered Agent

Name

OZDEMIR, HAKAN

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

6312 HIDDENDALE AVE

City

ORLANDO

FL

Zip Code

32819

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]

HAKAN OZDEMIR

9-2-2000

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE P ☐ Delete
NAME OZDEMIR, HAKAN
STREET ADDRESS 1508 HIGH GROVE WAY
CITY-ST-ZIP ORLANDO FL 32818

TITLE S ☐ Delete
NAME OZKAN, SERHAT
STREET ADDRESS 1617 S. KIRKMAN RD. APT. 1301
CITY-ST-ZIP ORLANDO FL 32811

TITLE VP ☒ Delete
NAME DEMIRCI, HAKAN
STREET ADDRESS 302 S. KIRKMAN RD.
CITY-ST-ZIP ORLANDO FL 32811

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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CITY-ST-ZIP

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] HAKAN OZDEMIR

9-2-2000

407-2983133

Signature, typed or printed name of signing officer or director

Date

Daytime Phone #

CR2E034 (5/00)