

2001 UNIFORM BUSINESS REPORT (UBR)

5/21

FILED
Jun 25, 2001 8:00 am
Secretary of State

05-23-2001 91188 036 ***150.00

DOCUMENT # P97000102823

1. Entity Name
 Automotive Sales, Advertising; and Profitability INC

Principal Place of Business 2321 Indian Mound Tr
 Kiss Fl 34746

Mailing Address

2. Principal Place of Business Suite, Apt. #, etc.

3. Mailing Address Suite, Apt. #, etc.

City & State

Zip **Country**

4. FEI Number 59-348-3228

Applied For ☐ **Not Applicable**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 Cynthia Donahue
 2321 Indian Mound Tr
 Kiss Fl 34746

7. Name and Address of New Registered Agent

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 Cynthia Donahue **DATE** 6/18/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

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

TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP** ☐ **Delete**

Pres Gregory Donahue
 2321 Indian Mound Tr
 Kiss Fl 34746

TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP** ☐ **Delete**

Secretary/Treasurer Cynthia Donahue
 2321 Indian Mound Tr
 Kiss Fl 34746

TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP** ☐ **Delete**

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TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP** ☐ **Delete**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

Vice Pres Alan Diehl
 2321 Indian Mound Tr
 Kiss Fl 34746

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

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Cynthia Donahue **DATE** 5/11/01 **Daytime Phone #** (407) 847-2117

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2034 (11/00)