

1999-2001
2000 UNIFORM BUSINESS REPORT (UBR)

1062

DOCUMENT # P9706010583 1

1. Entity Name
AUTO EQUITY ASSOCIATES INC.

FILED

01 DEC 21 AM 11:14

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

Principal Place of Business
**3058 ORANGE ST
 COCONUT GROVE
 FL 33133**

Mailing Address
**3058 ORANGE ST.
 COCONUT GROVE
 FL 33133**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0801594

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

99-01

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

700004776507--1

-01/16/02--01007--009

City

******150.00 FL ****150.00**

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)

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, 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	P	<input type="checkbox"/> Delete
NAME	SHAUNA HILL	
STREET ADDRESS	3058 ORANGE ST	
CITY-ST-ZIP	COCONUT GROVE FL 33133	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	700004776507--1	
CITY-ST-ZIP	-01/16/02--01007--010	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	700004776507--1	
CITY-ST-ZIP	-01/16/02--01007--011	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

Date

Daytime Phone #

CR2E034 (9/99)

292

October 26, 2001

Florida Department of State
P. O. Box 6327
Tallahassee, Florida 32314

Re: Auto Equity Associates, Inc.
#P97000105881

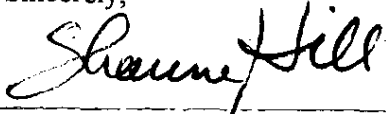
Dear Sir or Madam:

I never received the 1999 nor the 2000 annual report from your office. My new accountant looked up my file on the Internet and apparently the wrong address was on file for my company.

Now that I am aware of this requirement, whether I get a form or not from you it will be filed and paid for on time. I have two checks for \$150 each to pay for each year's fees. Since September 11 my business is so slow I don't even know if I will be able to keep going. This is all I can afford to pay at this time. If there are other fees due, I cannot pay them so I will have to consider closing my doors.

Should you need to reach, please do not hesitate to contact me.

Sincerely,



Shauna Hill

SH/s

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THE FLORIDA DEPARTMENT OF STATE

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