

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90120 045 ***150.00

DOCUMENT # **P98000012990**

1. Entity Name

THE PRICE IS RIGHT AUTO SALES, INC.

DO NOT WRITE IN THIS SPACE

040204

2. Principal Place of Business

6011 15TH STREET EAST

Suite, Apt. #, etc.

3. Mailing Address

6011 15TH STREET EAST

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

BRADENTON, FL

City & State

BRADENTON, FL

4. FEI Number

65-0811465

Applied For

Not Applicable

Zip

34203

Country

USA

Zip

34203

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

MEISSNER, GREGORY C.

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

1111 3RD AVENUE WEST #150

City

BRADENTON,

FL

Zip Code

34205

**DO NOT WRITE
IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

**PD
KALOGERATOU, ELPIDA
6011 15TH STREET EAST
BRADENTON, FL 34203**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**D
THURMAN, ROBERT
6011 15TH STREET EAST
BRADENTON, FL 34203**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**TSD
PASCUZZI, MARY MARGARET
6011 15TH STREET EAST
BRADENTON, FL 34203**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mary Margaret Pascuzzi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/02 (941) 752-4477
Date Daytime Phone #

CR2E034B (12/01)