

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 04, 2003 8:00 am**  
**Secretary of State**

04-04-2003 90144 024 \*\*\*150.00

DOCUMENT # P98000021508

1. Entity Name  
S&H AUTOMOTIVE PRODUCTS, INC.



Principal Place of Business  
1020 NW 62ND STREET  
HANGAR 12  
FORT LAUDERDALE FL 33309  
US

Mailing Address  
1020 NW 62ND STREET  
HANGAR 12  
FORT LAUDERDALE FL 33309  
US



2. Principal Place of Business  
6101 N.W. 10TH TERRACE  
Suite, Apt. #, etc.

3. Mailing Address  
6101 N.W. 10TH TERRACE  
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State  
FORT LAUDERDALE, FL  
Zip  
33309  
Country  
U.S.A.

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FORT LAUDERDALE, FL.  
Zip  
33309  
Country  
U.S.A.

4. FEI Number 65-0822221

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

PATTERSON, RICHARD B  
1020 NW 62ND STREET  
HANGAR 12  
FORT LAUDERDALE FL 33309

Name  
PATTERSON, RICHARD B.  
Street Address (P.O. Box Number is Not Acceptable)  
6101 N.W. 10TH TERRACE  
City  
FORT LAUDERDALE FL Zip Code  
33309

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Richard B. Patterson V.P.  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

4/1/03  
DATE

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HUTCHINGS, JAMES L. 1020 NW 62ND ST - HANGAR 12 FORT LAUDERDALE FL 33309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUTCHINGS, RONALD J 1020 NW 62ND ST - HANGAR 12 FORT LAUDERDALE FL 33309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP-DT PATTERSON, RICHARD B 1020 NW 62ND ST - HANGAR 12 FORT LAUDERDALE FL 33309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUTCHINGS, BARBARA J 1020 NW 62ND ST - HANGAR 12 FORT LAUDERDALE FL 33309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HUTCHINGS, JAMES L. 6101 N.W. 10TH TERRACE FORT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUTCHINGS, RONALD J 6101 N.W. 10TH TERRACE FORT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP-DT PATTERSON, RICHARD B. 6101 N.W. 10TH TERRACE FORT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUTCHINGS, BARBARA J. 6101 N.W. 10TH TERRACE FORT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard B. Patterson V.P. 4/1/03 954-958-9866  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)