

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90076 016 ***150.00

DOCUMENT # P98000030417

1. Entity Name
EASY MONEY AUTO SALES, INC.

Principal Place of Business

5295 GREENWICH RD
 STE 108
 VIRGINIA BEACH VA 23462

Mailing Address

5295 GREENWICH RD
 STE 108
 VIRGINIA BEACH VA 23462

2. Principal Place of Business

1271 North Semoran Blvd
 Suite, Apt. #, etc.

(Note: store closed 6/1/00)
 City & State
ORLANDO, FL

Zip
32807

Country

3. Mailing Address

5295 GREENWICH Rd.
 Suite, Apt. #, etc.

STE. 108
 City & State
VIRGINIA BEACH, VA

Zip
23462

Country

80044185



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0825443**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **STD**
GORDER, TAMI V
 STREET ADDRESS **5295 GREENWICH ROAD**
 CITY-ST-ZIP **VIRGINIA BEACH VA 23462**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **PD**
GREENBERV, DAVID
 STREET ADDRESS **5295 GREENWICH ROAD**
 CITY-ST-ZIP **VIRGINIA BEACH VA 23462**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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TITLE Change Addition
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 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

David M. Kilby
DAVID M. KILBY

Date

4/12/01

Daytime Phone #

(757) 499-1126

CR2E034 (10/00)