

FILED
Jul 09, 2002 8:00 am
Secretary of State

06-11-2002 90151 043 ***158.75

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000034121

1. Entity Name

AUTO-JOHN LEADER, INC.

DO NOT WRITE IN THIS SPACE

38058

2. Principal Place of Business

5301 N.W. 36 Street

Suite, Apt. #, etc.

3. Mailing Address

SAME

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FLORIDA

City & State

4. FEI Number

65-0831480

Applied For

Not Applicable

Zip

33166

Country

DADE

Zip

Country

5. Certificate of Status Desired

XX

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

BASTORI, ABELARDO

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

5301 N.W. 36 Street

City

MIAMI

FL

Zip Code
33166

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 resigning)

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	D BASTORI, ABELARDO 5301 N.W. 36 St. MIAMI, FL 33166	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BASTORI, ROBERTO 5301 N.W. 36 St MIAMI, FL 33166	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Abelardo Bastori / President 6/5/02 (305) 871-1100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E0348 (12/01)



Attachment
Document #
P98000034121

38058

July 5, 2002

Division of Corporations
P.O. Box 1500
Tallahassee, Fl 32302-1500

Re: Reinstatements of UBR

The reason the Uniform Business Report was filed late is because we never received the notice for renewal. We believe the address in your system currently is incorrect. Our correct mailing address is 5301 NW 36 Street, Miami Springs, Florida 33166 (Inside the Comfort Inn Hotel). We already remitted the payment of \$ 150.00 plus \$ 8.75 for a certificate of standing, which was send when we first send in the application. We hope this letter is sufficient to reinstate our status with the state of Florida. For any comments or questions, feel free to contact me at 305-871-1100.

Sincerely,

A handwritten signature in black ink, appearing to read 'Abelardo Bastori'.

Abelardo Bastori
President