

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000040553

1. Entity Name

CARS & MORE, INC.

FILED
May 22, 2000 8:00 am
Secretary of State

05-22-2000 90060 037 ***150.00

Principal Place of Business

2919 E. COMMERCIAL BLVD., SUITE A
 FT. LAUDERDALE FL 33308

Mailing Address

2919 E. COMMERCIAL BLVD., SUITE A
 FT. LAUDERDALE FL 33308-4207

2. Principal Place of Business

2800 E. Commercial Blvd

Suite, Apt. #, etc.
 Ste 208

City & State

Ft. Lauderdale FL

Zip

33308

Country

USA

3. Mailing Address

2800 E. Commercial Blvd

Suite, Apt. #, etc.
 Ste 208

City & State

Ft. Lauderdale FL

Zip

33308

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0836035

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

KATZ, ALLEN H
 2919 E. COMMERCIAL BLVD., SUITE A
 FT. LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name

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

2800 E. Commercial Blvd

Suite 208

City

Ft. Lauderdale

FL

Zip Code

33308

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

TITLE	DVP	<input type="checkbox"/> Delete
NAME	REICH, THOMAS	
STREET ADDRESS	1407 BANYAN CIRCLE	
CITY-ST-ZIP	POMPANO BCH FL 33069	
TITLE	S	<input type="checkbox"/> Delete
NAME	EINSTEIN, MARTIN	
STREET ADDRESS	2919 E. COMMERCIAL BLVD., STE. A	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	
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		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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		
TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOMAS EICHLOFF	
STREET ADDRESS	2800 E. Commercial Blvd Ste 208	
CITY-ST-ZIP	Ft. Lauderdale, FL 33308	
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		
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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-00

Date

Daytime Phone #

CR2E034 (9/99)