

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000053608

1. Entity Name

FOREMAN MOTORS, INC.

Principal Place of Business

Mailing Address

2198 WEST KING STREET
COCOA FL 32926

POST OFFICE BOX 410922
MELBOURNE FL 32941

2. Principal Place of Business

3. Mailing Address

1501 West King St.
Suite, Apt. #, etc.

P.O. Box 3115
Suite, Apt. #, etc.

City & State

City & State

Cocoa, FL

Cocoa FL

Zip
32926

Country

Zip
32924

Country

4. FEI Number

59-3517640

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

FOREMAN, DANIEL
2198 WEST KING STREET
COCOA FL 32926

Name

Foreman, Daniel

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

1501 West King St.

City

Cocoa

FL

Zip Code

32926

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] Daniel Foreman, President

1-17-01

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FOREMAN, DANIEL
3242 CAUTHEN CREEK DRIVE
MELBOURNE FL 32934 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Foreman, Daniel
1868 Thesy Dr.
Viera, FL 32940 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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] Daniel Foreman

1-17-01

321-403-8770

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

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

02-02-2001 90042 001 *****8.75

02-02-2001 90042 002 ***150.00

24156



DO NOT WRITE IN THIS SPACE