

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

7/28/2003-90134-041-\$61.25-\$61.25

DOCUMENT # P98000063801

1. Entity Name

PRICE LESS AUTO SALES INC.



FILED
CLERK OF DISTRICT COURT
DIVISION OF CORPORATIONS

03 AUG 21 PM 12:20

Principal Place of Business
5621 SR 54
NEW PORT RICHEY FL 34652

Mailing Address
5621 SR 54
NEW PORT RICHEY FL 34652

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3542689

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

MILLS, ANTHONY
11951 TEE TIME CIRCLE
NEW PORT RICHEY FL 34654

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

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

7-10-03

FILE NOW! FEE IS \$550.00
After September 10, 2003 Fee Will Be \$750.00
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	PO MILLS, ANTHONY D 5621 SR 54 NEW PORT RICHEY FL 34652	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/ D vice pres dir. MILLS, ANTHONY D. 5621 SR 54 NEW PORT RICHEY, FL 34652	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES. DIR/PO VICARI MILLS, DEBRA 11951 TEE TIME CIRCLE NEW PORT RICHEY, FL 34654	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	600022475536 08/21/03--01012--002 **558.75	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-10-03

CR2E034 (4/03)