

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P98000079138**

1. Entity Name

SIGNATURE AUTOMOTIVE INC.**FILED**
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90038 041 ***150.00

Principal Place of Business

Mailing Address

7815 N.W. 3RD PLACE
MARGATE FL7815 N.W. 3RD PLACE
MARGATE FL 33063-4716**80007910**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10440 NW 36th Place

Suite, Apt. #, etc.

3. Mailing Address

10440 NW 36th Place

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-0863473

Applied For

Not Applicable

Zip

33147

Country

Miami-Dade

Zip

33147

Country

Miami-Dade

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

FERNANDEZ, EDUARDO
10440 NW 36TH PLACE
MIAMI FL 33147

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ DeletePD
FERNANDEZ, EDUARDO
10440 N.W. 36TH PLACE
MIAMI FL 33147TITLE ☒ DeleteS
FERNANDEZ, MARTHA M
7815 NW 3RD PLACE
MARGATE FLTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☒ AdditionS/
Ramon F. Fernandez
10440 NW 36th Place
Miami, FL 33147TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/00 (305) 688-4089

Date

Daytime Phone #