

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

*10/2*

DOCUMENT # *98000079731*

1. Entity Name

*Aventura Brakes & Auto Center, Inc.*

**FILED**

02 JUN 24 PM 4:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

*20400 W. Dixie Hwy*

3. Mailing Address

*8211 W. Broward Blvd.*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

*200*

City & State

*N. Miami Beach, FL*

City & State

*Plantation, FL*

Zip

*33180*

Country

*US*

Zip

*33324*

Country

*US*

*99-02 UBR*

DO NOT WRITE IN THIS SPACE

4. FEI Number

*65-0862554*

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name

*Jay L. Borsky*

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

*8211 W. Broward Blvd., Ste. 200*

City

*Plantation*

FL

Zip Code

*33324*

**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.

*Jay L. Borsky*

*6-19-02*

(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)

**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		TITLE	
NAME	<i>David Shaltiel</i>	NAME	
STREET ADDRESS	<i>4760 Saracen Drive</i>	STREET ADDRESS	
CITY-ST-ZIP	<i>Hollywood, FL 33021</i>	CITY-ST-ZIP	
TITLE	<i>VP</i>	TITLE	
NAME	<i>Rinat Shaltiel</i>	NAME	
STREET ADDRESS	<i>4760 Saracen Drive</i>	STREET ADDRESS	
CITY-ST-ZIP	<i>Hollywood, FL 33021</i>	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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**DO NOT WRITE  
IN THIS SPACE**

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**-07/23/02--01055--018**  
**\*\*\*600.00 \*\*\*600.00**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*David Shaltiel*

*David Shaltiel*

*6-19-02*

*305-931-6603*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

*Zahr*

**Aventura Brakes & Auto Center, Inc.  
C/O 8211 W. Broward Blvd., Ste. 200  
Plantation, FL 33324**

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6-19-02

Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

To Whom It May Concern:

It has just come to my attention that my corporation has been administratively dissolved for not filing its annual report.

The mailing address for my business has changed and I never received my renewal notices.

Enclosed is a blank report, which I have filled out, along with a check for \$600.00 to cover the filing fees for 1999 – 2002. Please accept this in full satisfaction of my filing requirements and reinstate my corporation.

Thank you,



David Shaltiel  
President