

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000080634

1. Entity Name

ALL TRUCK & AUTO RECYCLING, INC.

R

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90152 039 ***150.00

Principal Place of Business

840 N.W. 7TH TERRACE
FT. LAUDERDALE FL 33311

Mailing Address

840 N.W. 7TH TERRACE
FT. LAUDERDALE FL 33311

2. Principal Place of Business

840 NW 7TH TERRACE

Suite, Apt. #, etc.

3. Mailing Address

840 NW 7TH TERRACE

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

FT. LAUDERDALE FL

City & State

FT. LAUDERDALE FL

4. FEI Number

65-0867-125

Applied For

Not Applicable

Zip

33311

Country

US

Zip

33311

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOSSEINI, SAM
1569 ISLAND WAY
WESTON FL 33326

7. Name and Address of New Registered Agent

Name

TREVOR GRADIDGE

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

1569 ISLAND WAY

SUNRISE, FLORIDA

33351

City

FT. LAUDERDALE

FL

Zip Code

33326

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 \$550.00 CORP
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 ☐ Delete
NAME D
STREET ADDRESS GRADIDGE, TREVOR
CITY-ST-ZIP 10553 N.W. 53 STREET
SUNRISE FL 33351

TITLE ☒ Delete
NAME D
STREET ADDRESS HOSSEINI, SAM
CITY-ST-ZIP 1569 ISLAND WAY
FT. LAUDERDALE FL 33326

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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TITLE ☐ Change ☐ 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: X

SIGNATURE: P. Hosseini

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

All Truck & Auto

ATTACHMENT

P98000080634

BO 103412

840 NW 7th Terrace

Address Line 2

City, State/Province Postal Code

Country

Phone 767-0847

Fax 555-9876

July 13, 2000

Dear Division of Corporations:

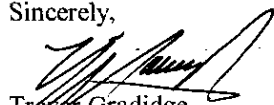
Thank you for your request for Uniform Business Report Filings.

Please be advised that we have never received the 1st Notice.

I've enclosed a check for the \$ 150.00 filing fee.

Again, thank you for your kind consideration. We regret being late with this filing . Last month we filed the appropriate form and fee with the Secretary of States office but we were unaware that this was due as well.

Sincerely,



Trevor Gradidge
President.