

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000089386

1. Entity Name

DELANEY AUTO SALES, INC.

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90080 016 ***150.00

Principal Place of Business

~~2880 SOUTH DELANEY AVE~~
ORLANDO FL 32806

Mailing Address

~~2880 S. DELANEY AVE~~
~~2880 SOUTH DELANEY AVE~~
ORLANDO FL 32806-5413

2. Principal Place of Business

108 EAST PINELOCH AVE.

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

~~108 EAST PINELOCH AVE~~

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3542086

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

BORRELL, EDGAR

~~2880 SOUTH DELANEY AVE~~
ORLANDO FL 32806

Name

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

108 EAST PINELOCH AVENUE

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 State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME BORRELL, EDGAR
STREET ADDRESS ~~2880 SOUTH DELANEY AVE~~
CITY-ST-ZIP ORLANDO FL 32806

TITLE **VS** ☐ Delete
NAME CHIANG, LARRY
STREET ADDRESS 3115 MCEWAN LANE
CITY-ST-ZIP ORLANDO FL 32812

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 108 EAST PINELOCH AVENUE
CITY-ST-ZIP

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)