2003 FOR PROFIT CORPORATION UNIFORM BUSINE; REPORT (UBR)

102

P98000091140 DCCUMENT # SECRETARY OF STATE 1. Entity Name DIVISION OF CORPORATIONS AUTOMOTIVE RECONDITIONING SPECIALIST, INC. 03 NOV 18 AM 8: 00 Principal Place of Business Mailing Address 2000 BANKS RD 2000 BANKS RD #XT BOK MARGATE FL 33063 MARGATE FL 33063 2. Principal Place of Business Mailing Address Gity & State Applied For 4. FEI Number 65-0870916 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NOTO, -NATO-RICHARD Box Number is Not Acceptable 2000 BANKS RD 217 **>** MARGATE FL 33063 Zip Code 2 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. 11-12-03 SIGNATURE (NOTE: Registered Agent signature required when reinstaling) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 % Trust Fund Contribution. Г Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE Change ☐ Addition NOTO, RICHARD A NAME NAME 7884 Wiles ROAD CORAL SPRINGS 200 BANKS ROAD-B√T STREET ADDRESS STREET ADDRESS 33067 CITY-ST-ZIP MARGATE FL 33063 CITY-ST-ZIP **DVP** Delete TITI F Addition NAME HOSEIN, SHAHEED NAME 7884 Wiles Road STREET ADDRESS 2000 BANKS ROAD-BY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARGATE FL 33063 TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS 11/18/83---01008---032 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS

12. Thereby 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 received 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

130/03 454-974-9438

Tannen, Reeber & Associates, Inc.

November 6, 2003

RE: Automotive Reconditioning Specialist, Inc.

7884 Wiles Road Coral Springs, FL. 33067 65-0870916 P98000091140 2003 Uniform Business Report

Florida Department of State:

Enclosed please find a copy of the original 2003 Uniform Business Report for Automotive Reconditioning Specialist, Inc. and a re-issued check in the amount of \$150.00. The original was mailed to you on January 30, 2003 along with a check in the amount of \$150.00. You have still not cashed the check. Please accept this filing and check and re-instate the above corporation.

Sincerely,

Dennis L. Reeber