

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 02, 2003 8:00 am**  
**Secretary of State**

04-02-2003 90382 020 \*\*\*150.00

**DOCUMENT # P98000091608**

1. Entity Name  
**NIO AUTOMOTIVE GROUP INC.**



Principal Place of Business  
**17384 KENNEDY DRIVE  
NORTH REDINGTON BEACH FL 33708**

Mailing Address  
**17384 KENNEDY DRIVE  
NORTH REDINGTON BEACH FL 33708**

2. Principal Place of Business  
**13111 Guia Blvd.**

3. Mailing Address  
**13111 Guia Blvd.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Madera Beach FL**

City & State  
**Madera Beach FL**

4. FEI Number  
**59-3539113**

Applied For  
Not Applicable

Zip  
**33708** Country  
**Pinellas**

Zip  
**33708** Country  
**Pinellas**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**BOLEK, RICHARD A  
1992 BONNIE COURT  
DUNEDIN FL 34698**

**7. Name and Address of New Registered Agent**

Name  
**Shirley Nelle**  
Street Address (P.O. Box Number is Not Acceptable)  
**13111 Guia Blvd.**  
City  
**Madera Beach FL** Zip Code  
**33708**

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.

SIGNATURE **X Shirley Nelle**  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**3/31 2003**

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DPST  
NELLE, SHIRLEY J  
17384 KENNEDY DRIVE  
NORTH REDINGTON BEACH FL 33708** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☒ Change ☐ Addition  
**13111 Guia Blvd.  
Madera Beach, FL 33708**

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

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X Shirley Nelle** **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/31 2003**

Date

Daytime Phone #

CR2E034 (10/02)