

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000000862

1. Entity Name
SOUTH ORLANDO IMPORTS, INC.

FILED
Apr 30, 2001 8:00 am
Secretary of State
04-30-2001 90415 045 ***150.00

Principal Place of Business Mailing Address
301 S. ORLANDO AVE., STE. 200 **PO BOX 1720**
MAITLAND FL 32751 **WINTER PARK FL 32790-1720**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-3551196		☐ Apply For ☐ Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ROBINSON, RICHARD 201 E. PINE ST., STE. 1200 ORLANDO FL 32801		Name Street Address (P.O. Box Number is Not Acceptable) City 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 _____ (NOTE: Registered Agent signature required when re-registering) 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, 2001 Fee will be \$650.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DPS HOLLER, ROGER W JR 301 S. ORLANDO AVE., STE. 200 MAITLAND FL 32751 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DV HOLLER, ROGER W III 301 S. ORLANDO AVE., STE. 200 MAITLAND FL 32751 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DV HOLLER, CHRISTOPHER A 301 S. ORLANDO AVE., STE. 200 MAITLAND FL 32751 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DVT HOLLER-ROGERS, JULIETTE 301 S. ORLANDO AVE., STE. 200 MAITLAND FL 32751 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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, which other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-01

Date

407-539-6500

Designated Agent

CR2E034 (10/00)