

FILED
Jul 08, 2002 8:00 am
Secretary of State

05-15-2002 90084 008 ***150.00

2002 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # *P99000018849*

1. Entity Name

*Repo Auto Brokers Inc.***DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

737 S. Edgemon Ave

3. Mailing Address

737 S. Edgemon Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

*Winter Springs**Winter Springs, FL*

City & State

City & State

*32708**32708-3409*

Zip

Zip

Country

Country

4. FEI Number

59-3576420

Applied For

Not Applicable

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

7. Name and Address of Current Registered Agent

Name

EUGENIO COLON

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

737 S. Edgemon Ave

City

Winter Springs

FL

Zip Code

32708

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

Eugenio Colon

(NOTE: Registered Agent signature is required when reinstating)

7/3/02

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.

(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 *President*
NAME *Eugenio Colon*
STREET ADDRESS *737 S. Edgemon Ave*
CITY - ST - ZIP *Winter Springs FL 32708*

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**DO NOT WRITE
IN THIS SPACE**

3. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Eugenio Colon

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #