

FILED

May 02, 2002 8:00 am
Secretary of State

05-02-2002 90101 032 ***158.75

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000024292

1. Entity Name

UNLIMITED AUTO ACCESSORIES, INC.

DO NOT WRITE IN THIS SPACE2. Principal Place of Business
2601 NW 103rd Street,

Suite, Apt. #, etc.

3. Mailing Address
2601 NW 103rd Street,

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, FLCity & State
Miami, FL4. FEI Number
65-0903965Applied For
Not ApplicableZip Country
33147 USAZip Country
33147 USA5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
GRIFFIN, RANDOLPH
Street Address (P.O. Box Number is Not Acceptable)
2601 NW 103rd Street

City Miami FL Zip Code 33147

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

RANDOLPH GRIFFIN, REG. AGENT 04/19/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

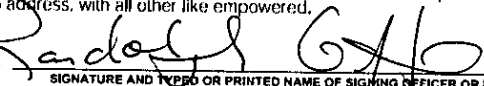
9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PID GRIFFIN, RANDOLPH 2942 NW 94th Street, Miami, FL 33147	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: 

RANDOLPH GRIFFIN, PRESIDENT 04/19/02

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)