2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # **P99000029754** Mar 28, 2000 8:00 am **Secretary of State** R & R AUTO BROKERS INC. 03-28-2000 90063 031 ***158.75 Principal Place of Business Mailing Address 1091 NW 78TH TERR 2715 NW 29TH TERR PLANTATION FL 33322-5122 LAUDERDALE LAKES FL 33311 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RICHARDSON, ELVIS Street Address (P.O. Box Number is Not Acceptable) 1091 NW 78TH TERR PLANTATION FL 33322 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Change ☐ Delete TITLE TITLE MARSHALL, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 2715 NW 29TH TERR CITY-ST-ZIP CITY-ST-ZIP LAUDERDALE LAKES FL 33311 ☐ Change ☐ Addition ☐ Delete TITLE PINNOCK, STUART NAME STREET ADDRESS STREET ADDRESS 2715 NW 29TH TERR CITY-ST-ZIP CITY-ST-ZIP LAUDERDALE LAKES FL 33311 ☐ Change Addition ☐ Delete TITLE TITLE RICHARDSON, ELVIS NAME NAME 2715 NW 29TH TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP LAUDERDALE LAKES FL 33311 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 the and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver at treated expowed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 in

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NSC 3/3/3/Daytime