

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000035016

1. Entity Name

ALL PRO AUTOMOTIVE, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAY -5 PM 1:19

Principal Place of Business 218 PONDELLA ROAD FORT MYERS FL 33903		Mailing Address 218 PONDELLA ROAD FORT MYERS FL 33903	
2. Principal Place of Business State, Apt. #, etc.		3. Mailing Address State, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. UEL Number	65-0914520	Applied F
		Not Appli
5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SABO, DANIEL 218 PONDELLA ROAD FORT MYERS FL 33903		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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

Signature, typed or printed name of registered agent or registered officer or registered agent or both in the State of Florida. (Date)

9. This corporation is eligible to satisfy its bonding requirement and elects to do so (See criteria on back)

FILE NOW!!! FEE IS \$ 155.00
After MAY 1, 2003 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Added to Fee

11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
NAME	PD	☐ Change	☐ A	NAME		☐ Change	☐ A
STREET ADDRESS	SABO, DANIEL			STREET ADDRESS			
CITY, ST, ZIP	218 PONDELLA ROAD			CITY, ST, ZIP			
	FORT MYERS FL 33903						
NAME		☐ Change	☐ A	NAME		☐ Change	☐ A
STREET ADDRESS				STREET ADDRESS			
CITY, ST, ZIP				CITY, ST, ZIP			
NAME		☐ Change	☐ A	NAME		☐ Change	☐ A
STREET ADDRESS				STREET ADDRESS			
CITY, ST, ZIP				CITY, ST, ZIP			
NAME		☐ Change	☐ A	NAME		☐ Change	☐ A
STREET ADDRESS				STREET ADDRESS			
CITY, ST, ZIP				CITY, ST, ZIP			
NAME		☐ Change	☐ A	NAME		☐ Change	☐ A
STREET ADDRESS				STREET ADDRESS			
CITY, ST, ZIP				CITY, ST, ZIP			

000018023540
05/05/03--01112--018 **155.00

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07, Fla. 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, or on an attachment with an address, with all other information.

SIGNATURE: X Daniel Sabo

Daniel Sabo (Pres) 4/29/03
5/9/03 an