

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 19, 2001 8:00 am
Secretary of State

06-19-2001 90010 032 ***158.75

DOCUMENT # P99000038248

1. Entity Name

USA AUTO SALES, CORP.

Principal Place of Business

Mailing Address

1665 BAY ROAD
 APT 317

PO BOX 830311

MIAMI, FL 33139

MIAMI FL 33283

2. Principal Place of Business

3. Mailing Address

7413 NW 54 STREET

7413 NW 54 STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI FL

MIAMI FL

Zip

Country

Zip

Country

33166

33166

4. FEI Number

65-0914900

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

C0071369

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JASSIR, MARIO J.
 11945 SW 101 TERR.
 MIAMI FL 33186

Name

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

City

FL

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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

06-11/01

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 \$550.00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	☐ Delete
NAME	JASSIR, MARIO J.	
STREET ADDRESS	1665 BAY ROAD # 317	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
TITLE	STD	☐ Delete
NAME	PEREZ, HERMIDES R	
STREET ADDRESS	3550 NE 169 STREET # 406	
CITY-ST-ZIP	N. MIAMI BEACH FL 33160	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	☒ Change ☐ Addition
NAME	JASSIR, MARIO J.	
STREET ADDRESS	11945 SW 101 TERR.	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	V-T	☒ Change ☐ Addition
NAME	PEREZ, HERMIDES R	
STREET ADDRESS	12566 SW 170 AVE	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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 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, with all other like empowered.

SIGNATURE:

MARIO J. JASSIR / MARIO J. JASSIR

06-11/01 (305) 891-9932

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #