

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Jul 20, 2000 8:00 am**
Secretary of State

07-20-2000 90017 010 ***150.00

DOCUMENT # P99000038402

1. Entity Name

S & L AUTO SALES, INC.

Principal Place of Business

4059 NW 135 ST.
OPA-LOCKA FL 33054

Mailing Address

4059 NW 135 ST.
OPA-LOCKA FL 33054

2. Principal Place of Business

4130 NW 135 ST

Suite, Apt. #, etc.

3. Mailing Address

4130 NW 135 ST

Suite, Apt. #, etc.

City & State

OPA-LOCKA FL

Zip

33054

Country

MDA DE

City & State

OPA-LOCKA FL

Zip

33054

Country

MIA DE

4. FEI Number

650915850

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

PELLECEC, LUIS
4059 NW 135 ST.
OPA-LOCKA FL 33054

7. Name and Address of New Registered Agent

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

7-12-20009. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00**
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 **P** ☐ Delete
NAME **PELLECEC, LUIS**
STREET ADDRESS **4059 NW 135 ST.**
CITY-ST-ZIP **OPA-LOCKA FL 33054**TITLE **V** ☐ Delete
NAME **CRUZ, SALVADOER**
STREET ADDRESS **2082 NE 173 ST.**
CITY-ST-ZIP **NORTH MIAMI BEACH FL 33162**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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:

SIGNATURE REQUIRED
Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

7-12-2000**AUUB00373**

DO NOT WRITE IN THIS SPACE

Miami 7-12-00

Attachment
P990000038402
A0068573

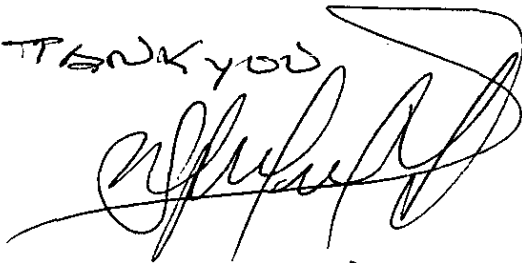
TO HOWN IT MAY CONCERN

PLEASE BE ADVISE THAT THE ADDRESS
OF SOL AUTO SALES INC. IS 4130 NW
135 ST. OPA-LOCA FL.

IF YOU NEED MORE INFO PLEASE

CALL AT 305 6870159 FROM 8:00 AM
TO 7:00 PM MON/FRI.

THANK YOU



Salvador Cruz

VP