

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000041803

1. Entity Name

MATTA'S AUTO SALE, INC.

FILED

04 NOV -4 PM 1:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

3340 S. STATE ROAD 7
MIAMI, FL 33023

Mailing Address

3215 S STATE RD 7
MIAMI, FL 33023

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

USA

Zip

Country

USA

4. FEI Number

65-020031

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

06/28/04 90012 009 \$150.00
DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MATA MICHEL
5713 NW 112 PL
MIAMI, FL 33178

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

MATA MICHEL REGISTERED AGENT

10/20/04

(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)

☐

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

TITLE P, S
NAME MATA MICHEL
STREET ADDRESS 3340 S STATE ROAD 7
CITY-ST-ZIP MIAMI, FL 33023 ☐ Delete

TITLE VP
NAME MELO OLIVIN RAMON G
STREET ADDRESS 3340 S STATE RD 7
CITY-ST-ZIP MIAMI, FL 33023 ☐ Delete

TITLE T
NAME MELO-OLIVIN RONALD E
STREET ADDRESS 3340 S STATE ROAD 7
CITY-ST-ZIP MIAMI, FL 33023 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MATA MICHEL

PRESIDENT

Date

10/20/04

Daytime Phone #

(954)

MATTA'S AUTO SALE, INC.
3340 S STATE ROAD 7
MIRAMAR, FL 33023

October 29, 2004

Division of Corporations
Reinstatement Section
Po Box 6327
Tallahassee, FL 32314-

Ref: Document Number P99000041803

Dear Sirs:

As per today conversation with one of your agents, attached you will find a copy of the Money Order we send in May 19, 2004 for the amount of \$400 paying the difference of the \$150 that we send first and that was already applied to our account. Also as per request of your agent we are sending copy of the report we filed on that time.

Please make all the necessary adjustments in our account and if you need any additional information please contact us at 954-9626777

Sincerely,



Michel Matta
President