## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 26, 2001 8:00 am Secretary of State DOCUMENT # P9900043337 1. Entity Name ABC AUTOTECH, INC. 03-26-2001 90019 013 \*\*\*150.00 Principal Place of Business Mailing Address 1621-R CORTEZ ROAD WEST 1621-R CORTEZ ROAD WEST **BRADENTON FL 34207 BRADENTON FL 34207** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0919551 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BLALOCK, LANDERS, WALTERS & VOGLER, P.A. Street Address (P.O. Box Number is Not Acceptable) 802-11TH STREET WEST **BRADENTON FL 34205** City 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, 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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete ☐ Addition TITLE ☐ Change BOROVICA, RICHARD NAME NAME STREET ADDRESS 408 65TH ST CT NW STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** TITLE ☐ Delete TITLE Change Addition ABBOTT, ROBERT NAME NAME STREET ADDRESS 4323 82ND ST W STREET ADDRESS CITY-ST-7IP **BRADENTON FL 34209** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 impowered.

JRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR