

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 26, 2001 8:00 am**  
**Secretary of State**

07-26-2001 90004 002 \*\*\*150.00

0018230 AV

**DOCUMENT # P99000047878**  
 1. Entity Name  
**PERFECTION AUTOMOTIVE, PERFORMANCE & SERVICE, IN**

Principal Place of Business  
**2401 SW 31 AVE. BLDG. H-2**  
**PEMBROKE PARK FL 33009**

Mailing Address  
**2401 SW 31 AVE. BLDG. H-2**  
**PEMBROKE PARK FL 33009**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 City & State

Zip  
 Country

4. FEI Number **65-0933632**  
 Applied For  
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**GURLEY, MARLON**  
**2401 SW 31 AVE. BLDG. H-2**  
**PEMBROKE PARK FL 33009**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐

**FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	<b>DP</b> <b>GURLEY, MARLON</b> <b>2612 N 26 TERRACE</b> <b>HOLLYWOOD FL 33020</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Marlon Gurley* **07-19-01** **954 986 4050**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)

**PERFECTION  
AUTO SERVICE, INC.**

2401 SW 31ST AVE., Bldg. H2  
Pembroke Park, FL 33009  
(954) 986-4050  
(954) 986-1115 FAX

*Attachment  
A0079599*

July 23, 2001

Document #P99000047878

RE: UNIFORM BUSINESS REPORT FOR 2001

Division of Corporations Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

After receiving the filing form after May 2001, I contacted your office and spoke with Martha. She informed me that I could attach this letter to notify you that the filing form was not posted to me on time. It was delivered to my office in June. I would appreciate it very much, if you would waive the late fee because it was out of my control. Thank you for your cooperation in this matter. If you have any additional inquiries please feel free to contact me at (954) 986-4050 Monday through Friday, from 9am-5pm.

Thank you,

  
Marion Gurley  
President  
Perfection Auto Service, Inc.