2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P99000051287

Mailing Address

1. Entity Name

INTEGRITY AUTO EXCHANGE, INC.



FILED Mar 13, 2003 8:00 am Secretary of State

03-13-2003 90080 038 ***150.00

Principal Place of Business 1270 BELLE AVE #102 WINTER SPRINGS FL 32708			Mailing Address 1270 BELLE AVE #102 WINTER SPRINGS FL 32708										
2. Principal Place of Business			3. Mailing Address					ı	(BRIIDDI SID IBSID IBSII DANG BOSSI O	 	JI Bi# FA	Attriant ten	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES					
City & State)		City & State				4.	4. FEI Number 59-3578549			Applied For Not Applicable		
Zip		Country	untry Zip Cour			try	5.	5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name ar	nd Address of Current	Registere	d Agent		7. Name and Address of New Registered Agent							
		-	<u>-</u> -			Name					-	1	
PLAKON, F	robert .e ave., #10:		Street /			dress (P.O. Box Number is Not Acceptable)							
	PRINGS FL 3			•	-		-						
		v v	-			City				FL	Zip Cod	j	
8. The above the obligation	named entity s ons of register	ubmits this statement for ed agent.	or the purp	ose of changing its	register	ed office or re	gistered a	agent,	or both, in the State of Florid	da. Iam fa	miliar with,	and accept	
SIGNATURE _	Signature, typed or	printed name of registered agen	and title if app	icable. (NOT	E: Registere	d Agent signature r	required when	n reinstati	ing)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Finar Trust Fund Contribution.	ncing		00 May Be d to Fees		
	rayable to i	OFFICERS AND		DS	11.		A	<u> </u>	IONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 11	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: