

**2000 UNIFORM BUSINESS REPORT (UBR)**

4/

**FILED**  
**May 24, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90137 047 \*\*\*150.00

**DOCUMENT # P99000052606**

1. Entity Name

**A 2 ZACH'S AUTO SALES INC.**

Principal Place of Business

1750 NW 107TH TERR.  
 PLANTATION FL 33322

Mailing Address

1750 NW 107TH TERR.  
 PLANTATION FL 33322-6423

2. Principal Place of Business

**3500 N. State Rd 7**

3. Mailing Address

**1750 NW 107th Terr.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**200A**

City & State

City & State

**Lauderdale Lakes N. Plantation FL**

**11**

Zip

Country

Zip

Country

**33319**

**Brwd**

**33322**

**Brwd**

4. FEI Number

**65-0925235**

Applied For

Not Applicable

5. Certificate of Statute Desired

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GOLDBERG, SHEPLEY**  
**1750 NW 107TH TERR.**  
**PLANTATION FL 33322**

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

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

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
President	Shepley Goldberg	1750 NW 107th Terr	Plantation FL 33322	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exception 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:

*Shepley Goldberg* Shepley Goldberg

4/18/00 (954) 261-5746

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)