2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

C/O LAW OFFICES OF DAVID HARRIS SINGER

DOCUMENT # P99000054332

SIGNATURE: CURTISON WINKLES PRESIDENT

1. Entity Name

Principal Place of Business

C/O LAW OFFICES OF DAVID HARRIS SINGER

PRO STAR AUTOMOTIVE SUPPLY, INC.

13320 S.W. 128TH STREET MIAMI FL 33186			13320 S.W. 128TH STREET MIAMI FL 33186-5899					(1) 01 000 0 1001	••••••••••••••••••••••••••••••••••••	IA 1731 146)	
2. Principal Place of Business 4777 WEST FLAGLER ST.			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE	IN THIS SP	ACE		
City & State MIAMI, FL			City & State			4, [4. FEI Number Applied For 65-0934001 Not Applicable				
Zip 33134		Country USA	Zip Country			J	5. Certificate of Status Desired S8.75 Additional Fee Required				İ
		and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent					1	
13320		HARRIS ESQ. TH STREET	Street Addres		ddress (P.O. B	ss (P.O. Box Number is Not Acceptable)					
					City			FL	Zip Code	•	
CICNATURE		y submits this statement for or printed name of registered agent a				registered ag	ent, or both, in the State of Floric	DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)			FILE NOW!!! FEE IS \$150. After MAY 1, 2000 Fee will be \$ Make Check Payable to Departmen			50.00 t of State	10. Election Campaign Finan Trust Fund Contribution.		Ådded	May Be to Fees	
11.	OFFICERS AND I					DITIONS/CHANGES TO OFFICE				l a	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINKLES, CURTIS O 18105 S.W. 5TH COURT PEMBROKE PINES FL 33029		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP			ESIDENT / SECRETAL S, CURTIS O.	RY (Change	Addition	0,0/
TITLE NAME STREET ADDRESS CITY-ST-ZIP		GERARDO NND CANAL DRIVE 33144	☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP	, -	D / VICE PRESIDENT GOMEZ, GERARDO G.		Change	☐ Addition	ز
TITLE NAME STREET ADDRESS			☐ Delete		TADDRESS	المستعدد			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET	T ADDRESS			1	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	į		☐ Delete	TITLE NAME STREET CITY-S	T ADORESS ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET	ADDRESS				Change .	Addition	
indicated of the cor	on this repo poration or t	rt or supplemental report is ne receiver or trustee empo	this filing does not qualify fo true and accurate and that re- twered to execute this report with all other like empowered	ny signatu as require	nption star ire shall h	ted in Section ave the same apter 607. Flori	119.07(3)(I), Florida Statutes. I fullegal effect as if made under oat ida Statutes; and that my name a	urther certif th; that I an appears in	y that the in an officer Block 11 or	nformation or director Block 12 if	

FILED

May 03, 2000 8:00 am Secretary of State

05-03-2000 90044 045 ***150.00

4/24/00

305-774-0093 Daytime Phone #