FILED

## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## Jul 10, 2003 8:00 am P99000055152 **Secretary of State** DOCUMENT # 1. Entity Name 07-10-2003 90111 008 \*\*\*150.00 FULL LINE AUTOMOTIVE OF VERO BEACH, INC. Principal Place of Business Mailing Address 2345 12TH AVENUE 2345 12TH AVENUE VERO BEACH FL 32960 VERO BEACH FL 32960 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 65-0927707 Not Applicable Zip Country Zip 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 Name STREETER, ROBERT Street Address (P.O. Box Number is Not Acceptable) 2345 12TH AVENUE VERO BEACH FL 32960 City 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. | am familiar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete Change Addition TITLE TITLE STREETER, ROBERT NAME NAME **2345 12TH AVENUE** STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE GRAHAM, CHARRAN NAME NAME 617 FT PIERCE BLVD STREET ADDRESS STREET ADDRESS FT PIERCE FL 34951 CITY-ST-ZIP CITY-ST-ZIP - Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TIT1 F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI E ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition

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.

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CR2E034 (4/03)

## AHACKMENT# FULL LINE AUTONOTIVE FULL LINE AUTONOTIVE PAGO 0005513

2345 12<sup>TH</sup> AVENUE VERO BEACH, FLORIDA 32960 (772) 978-7846 FAX (772) 978-9360

July 7, 2003

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

Subject: Uniform Business Report

Dear Sir/Madam,

FULL LINE AUTOMOTIVE received the (UBR) at the end of June 2003. We did not receive a prior notice.

In the year 2002 your office was mailing the notices to our accountant. FULL LINE AUTOMOTIVE has since corrected the address with your office. However, FULL LINE AUTOMOTIVE did not receive the notice in time to facilitate filing.

Please waive the late fee.

Sincerely yours,

ROBERT STREETER

President