2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000071459

1. Entity Name

STREET ADDRESS

GEORGE'S AUTO SALES INC.



FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90471 002 ***150.00

							
Principal Place of E 1717 W. KENNEDY B TAMPA FL 33606	Mailing Address 1717 W. KENNEDY E TAMPA FL 33606	W. KENNEDY BLVD.					
2. Principal Place of Business Suite, Apt. #, etc. City & State		3. Mailing Address					
		Suite, Apt. #, etc. City & State			☐ CHECK HERE IF MAKING CHANGES		
					4. FEI Number 59-3589882	Applied For Not Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	. Name and Address of Co	urrent Registered Agent	ed Agent		7. Name and Address of New Registered Agent		
			-	Name			
	EORGE JR	The second secon	Street Address		(P.O. Box Number is Not Acceptable)*		
1717 W. KENNI							
TAMPA FL 3360	06		·			77.0-4	
				City FL Zip Code			
the obligations	ned entity submits this stater of registered agent.	ment for the purpose of chan	ging its registe	ered office or regi	istered agent, or both, in the State of Florida. I		
SIGNATURE Signa	ature, typed or printed name of register	ed agent and title if applicable.	(NOTE: Registe	ered Agent signature red	quired when reinstating) DA	ATE	
After Ma	NOW!!! FEE IS \$150. by 1, 2003 Fee will be \$5 yable to Florida Departr	50.00			9. Election Campaign Financing Trust Fund Contribution.	Added to Fees	
10. OFFICERS AND DIRECTORS 11.			1	ADDITIONS/CHANGES TO OFFICERS			
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After	May 1, 2003 Fee will be \$550.00			Trust Fund Contribution.	LJ Added	101003					
Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11											
10.	OFFICERS AND DIRECTO	IRS	11.	ADDITIONS/CHANGES TO OFFICERS		Addition					
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	VELAZQUEZ, GEORGE JR		NAME								
STREET ADDRESS	717 W. KENNEDY BLVD.		STREET ADDRESS								
	TAMPA FL 33606		CITY-ST-ZIP								
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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. In all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE SIGNATURE AND TYPED OR PRINTER NAME OF STORMS OFFICER OR DIRECTOR

Date Grand 200 00 Depting Phone

3/5/3