

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000082146

1. Entity Name

R-GOAL AUTOMOTIVE CONSULTANTS, INC.

**FILED**  
**Feb 28, 2000 8:00 am**  
**Secretary of State**

02-28-2000 90182 006 \*\*\*150.00

Principal Place of Business

9704 MAJESTIC WAY  
BOYNTON BEACH FL 33437

Mailing Address

9704 MAJESTIC WAY  
BOYNTON BEACH FL 33437-3328

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0948877

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVE.  
CORAL GABLES FL 33134

Name

WAYNE E BARTER

Street Address (P.O. Box Number is Not Acceptable)

9704 MAJESTIC WAY

BOYNTON BEACH

FL

Zip Code 33437

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

Wayne E. Barter President

1-31-00

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.  
(See criteria on back)

☐

**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD  
NAME BARTER, WAYNE E  
STREET ADDRESS 9704 MAJESTIC WAY  
CITY-ST-ZIP BOYNTON BEACH FL 33437

☐ Delete

TITLE VSD  
NAME RYAN, BROOKS  
STREET ADDRESS 9704 MAJESTIC WAY  
CITY-ST-ZIP BOYNTON BEACH FL 33437

☒ Delete

TITLE  
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CITY-ST-ZIP

☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Wayne E. Barter President

1-31-00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)