

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000091960

1. Entity Name
AUTOS & AUTOS, INC.

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90223 015 ***150.00

Principal Place of Business

5821 FUNSTON STREET
HOLLYWOOD FL 33023

Mailing Address

1161 NE 200 TERRACE
NORTH MIAMI BEACH FL 33177

00050785



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5821 FUNSTON STREET
Suite, Apt. #, etc.

3. Mailing Address

1161 NE 200 TERRACE
Suite, Apt. #, etc.

City & State

HOLLYWOOD FLORIDA

City & State

NORTH MIAMI BEACH FL

Zip

33023

Country

U.S.A

Zip

33129

Country

U.S.A

4. FEI Number 65-0955468

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AHMAD, WAKIL
1161 NE 200 TERRACE
MIAMI FL 33179

7. Name and Address of New Registered Agent

Name

N/A

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

N/A

City

N/A

FL

Zip Code

N/A

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 N/A

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, 2001 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 DP ☐ Delete
NAME AHMAD, WAKIL
STREET ADDRESS 1161 NE 200 TERRACE
CITY-ST-ZIP N MIAMI BEACH FL 33179

TITLE DV ☐ Delete
NAME ANIS, SEEMA
STREET ADDRESS 1161 NE 200 TERRACE
CITY-ST-ZIP N MIAMI BCH FL 33179

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Wakil Ahmad* WAKIL AHMAD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-30-01
Date

305-218-4455 CELL
305-651-6406
Daytime Phone #

CR2E034 (10/00)