

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 24, 2003 8:00 am**  
**Secretary of State**

04-24-2003 90192 017 \*\*\*158.75

**DOCUMENT # S45869**

1. Entity Name  
**ARA AUTOMOTIVE, INC.**



Principal Place of Business  
**560 BUSINESS PKG**  
**SUITE 4**  
**ROYAL PALM BEACH FL 33411**  
**US**

Mailing Address  
**13780 ISHNALA CR.**  
**WELLINGTON FL 33414**  
**US**



2. Principal Place of Business  
**530 Business Pkg.**

3. Mailing Address  
**530 Business Pkg**

Suite, Apt. #, etc.  
**Suite #4**

Suite, Apt. #, etc.  
**Suite #4**

City & State  
**Royal Palm Beach, FL.**

City & State  
**Royal Palm Beach, FL.**

Zip  
**33411**

Country  
**US**

Zip  
**33411**

Country  
**US**

4. FEI Number  
**65-0267957**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**ROCKWERK, ALLEN**  
**13780 ISHNALA CR.**  
**WELLINGTON FL 33414**

7. Name and Address of New Registered Agent

Name  
**Rockwerk, Allen**

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

**530 Business Pkg Suite #4**

City  
**ROYAL PALM BEACH, FL**

Zip Code  
**33411**

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. I am familiar with, and accept the obligations of registered agent. **Addreses**

SIGNATURE **[Signature]**  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **4/22/03**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P**  
**ROCKWERK, ALLEN**  
**13780 ISHNALA CR.**  
**WELLINGTON FL 33414**  
☒ Delete **Addres**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P.**  
**Rockwerk, Allen**  
**530 Business Pkg #4**  
**Royal Palm Beach, FL 33411**  
☒ Change ☐ Addition **Addres**

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

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NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ 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.

SIGNATURE:

**[Signature]**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Allen Rockwerk, P.**  
Date **4/22/03**  
Daytime Phone # **(561) 795-0997**

CR2E034 (10/02)