## **2000 UNIFORM BUSINESS REPORT (UBR)**

## Apr 24, 2000 08:00 AM DOCUMENT # **\$70009** 1. Entity Name **Secretary of State** FT. LAUDERDALE NISSAN, INC. Principal Place of Business Mailing Address 110 S.E. 6TH STREET., 20TH FLOOR 1300 S FEDERAL HWY FT LAUDERDALE FT LAUDERDALE FL FL 33316 33301 2. Principal Place of Business 3. Mailing Address 110 S.E. 6TH STREET Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 20TH FLOOR City & State City & State 4. FEI Number Applied For FT LAUDERDALE FL 65-0273822 Not Applicable Zip Country 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 CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 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. 04/24/2000 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change X Addition NAME NAME BOURHIS MARC STREET ADDRESS STREET ADDRESS 110 S.E. 6TH STREET, 20TH FLOOR CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL. 33301 TITLE ☐ Delete TITLE X Change ☐ Addition NAME NAME HAWKINS THOMAS FERRANDO JONATHAN P STREET ADDRESS 110 S.E. 6TH STREET., 20TH FLOOR STREET ACCRESS 110 S.E. 6TH STREET, 20TH FLOOR CITY-ST-ZIF FL 33301 FORT LAUDERDALE CITY-ST-7IP FORT LAUDERDALE FT. 33301 ☐ Delete TITLE TILE X Change ☐ Addition NAME HYLE KATHLEEN W NAME **EVANS** JAMES STREET ADDRESS 110 S.E. 6TH STREET., 20TH FLOOR 110 S.E. 6TH STREET, 20TH FLOOR STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE 33301 CITY-ST-ZIP FORT LAUDERDALE 33301 TITLE VSD ☐ Defete TITLE X Change ☐ Addition NAME COLE **JAMES** O NAME FERRANDO JONATHAN P STREET ADDRESS 110 S.E. 6TH STREET., 20TH FLOOR 110 S.E. 6TH STREET, 20TH FLOOR STREET ADDRESS FORT LAUDERDALE CITY-ST-ZIP FORT LAUDERDALE 33301 FL. 33301 FL. CITY-ST-ZIP TITLE ☐ Delete TITLE X Change ☐ Addition NAME **EVANS** JAMES NAME MAROONE MICHAEL 110 S.E. 6TH STREET., 20TH FLOOR 110 S.E. 6TH STREET, 20TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL33301 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/8

FILED

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.

NONATURE. IMPEDIEDDANDO