

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 13, 2004 8:00 am
Secretary of State

04-13-2004 90041 047 ***150.00

DOCUMENT # **S 82399**

1. Entity Name
Quick Motors Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
914 SR 542
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 1738
Suite, Apt. #, etc.

City & State
Dundee Florida

City & State
Dundee FLA.

Zip
33838

Country
Polk

Zip
33838

Country
Polk

4. FEI Number
59 308 1850

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Waters, Emmett T.

Street Address (P.O. Box Number is Not Acceptable)
914 SR 542

City
Dundee

FL Zip Code
33838

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐ (See criteria on back)

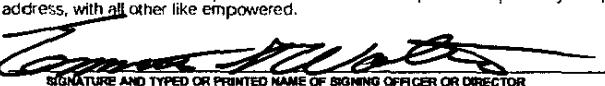
January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			
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DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **04/06/04 863-439-2018**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

File Daytime Phone #

CR2E034B (12/01)