

2004 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S89496

1. Entity Name
EXCLUSIVE MOTORS GROUP CORP.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 DEC 20 PM 2:45

Principal Place of Business
400 EAST 9TH STREET
HIALEAH FL 33010

Mailing Address
400 EAST 9TH STREET
HIALEAH FL 33010



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0291079

Applied For
Not Applicable

Zip

Country

Zip

Country

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

ARGUELLES, ALFREDO JR.
1750 W. 46TH STREET
STE. 128
HIALEAH FL 33012

Name *Guerrero Enrique*

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

3980 E 8 AV-

City *HIALEAH*

FL

Zip Code *33013*

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$350.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

NAME PD GUERRERO, ENRIQUE
STREET ADDRESS 3980 E 8 AVE

TITLE
NAME

000043365820

12/13/04--01058--023 **401.00



EXCLUSIVE MOTORS
GROUP CORP
400 EAST 9TH ST.
HIALEAH, FL 33010

Pay to the order of

Division of Corporations
One hundred fifty

\$ *150.00*

Dollars



FLORIDA DEPARTMENT OF STATE

For

Guerrero

STREET ADDRESS
CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.07(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 REQUIRED

Guerrero

12/20/04

0141844 AV

CR2E034 (10/02)