

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2003 8:00 am
Secretary of State

02-14-2003 90182 019 ***150.00

DOCUMENT # V31830

1. Entity Name
FLORIDA WEST AUTOMOTIVE SUPPLIES, INC.



Principal Place of Business
**5417 DOMINICA CIRCLE
SARASOTA FL 34233**

Mailing Address
**5417 DOMINICA CIRCLE
SARASOTA FL 34233**

2. Principal Place of Business
6043 DEACON PLACE

3. Mailing Address
5829 FERRARA DRIVE

Suite, Apt. #, etc.
UNIT 12

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
SARASOTA FL

City & State
SARASOTA, FL

4. FEI Number
65-0330286

Applied For
☐ Not Applicable

Zip
SARASOTA

Country
SARASOTA

Zip
34238

Country
SARASOTA

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

**MILEHAM, CARLINA
5417 DOMINICA CIRCLE
SARASOTA FL 34233**

Name
MILEHAM CARLINA

Street Address (P.O. Box Number is Not Acceptable)
5829 FERRARA DRIVE

City
SARASOTA FL Zip Code
34238

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 Albert P. Mileham (ALBERT P. MILEHAM) SECRETARY

02-01-03

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 \$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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **MILEHAM, ALBERT P.**
CITY-ST-ZIP **5417 DOMINICA CIRCLE 5829 FERRARA DRIVE
SARASOTA FL 34238**

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **MILEHAM, CARLINA**
CITY-ST-ZIP **5417 DOMINICA CIRCLE-
SARASOTA FL 34233**

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

TITLE ☐ Delete
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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 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: Albert P. Mileham (ALBERT P. MILEHAM)

02-01-03 (941-926-2516)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)