

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 01, 2000 8:00 am
Secretary of State

09-01-2000 90061 036 ***150.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000041972

1. Entity Name
EUROPEAN AUTO PERFORMANCE, INC.

Principal Place of Business

18624 SW 105 AVE
MIAMI FL 33157

Mailing Address

18624 SW 105 AVE
MIAMI FL 33157

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0886837

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, ALEJANDRO
18624 SW 105 AVE
MIAMI FL 33157

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7/18/2000

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

☐

FILE NOW!!! FEE IS \$550.00.
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	☐ Delete
NAME	LOPEZ, ALEJANDRO	
STREET ADDRESS	18624 SW 105 AVE	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	VSD	☐ Delete
NAME	LOPEZ, GREGORIO	
STREET ADDRESS	18624 SW 105 AVE	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
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CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

ALEJANDRO LOPEZ

7/19/00

Doc# P99000041972
DOU83060

July 18, 2000

UNIFORM BUSINESS REPORT
DIVISION OF CORPORATION
P.O. Box 1500
Tallahassee, Florida 32302-1500

Ref: Document P99000041972

Dear Sir:

I am writing this letter in the name of our company EUROPEAN AUTO PERFORMANCE, INC. who was unable to paid on time the annual report due to the fact: 1) We never received such a paper at the address the business is located and 2) Our former accountant was diagnosed with cancer in the liver and he was unable to perform in completing his duties. Finally we got the report form from your office in order to send it to you with the check of \$150.00 to pay the annual report.

We hope that your generosity and understanding of this matter will be sufficient enough to avoid any penalty and the Company will become active again.

Cordially yours,

ALEJANDRO LOPEZ

President, European Auto Performance, Inc

275 FONTAINEBLEAU BLVD., SUITE 130 • MIAMI, FL 33172
PHONE: 305-225-8066 • FAX: 305-225-5738