

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L12142

FILED
Feb 27, 2009
Secretary of State

Entity Name: ACTION REPAIR, INC.

Current Principal Place of Business:

% SHARON SANDIDGE
7808 WEST SUNFLOWER DRIVE
MARGATE, FL 33063

New Principal Place of Business:

% SHARON SANDIDGE
7808 WEST SUNFLOWER DRIVE
MARGATE, FL 33063 US

Current Mailing Address:

% SHARON SANDIDGE
7808 WEST SUNFLOWER DRIVE
MARGATE, FL 33063

New Mailing Address:

% SHARON SANDIDGE
7808 WEST SUNFLOWER DRIVE
MARGATE, FL 33063 US

FEI Number: 65-0143186

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDIDGE, SHARON
7808 WEST SUNFLOWER DRIVE
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: SANDIDGE, FRANK,
Address: 7808 WEST SUNFLOWER DR.
City-St-Zip: MARGATE, FL

Title: S () Delete
Name: SANDIDGE, SHARON,
Address: 7808 WEST SUNFLOWER DR.
City-St-Zip: MARGATE, FL

Title: S () Delete
Name: SANDIDGE, SHARON,
Address: 7808 WEST SUNFLOWER DR.
City-St-Zip: MARGATE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: SANDIDGE, FRANK,
Address: 7808 WEST SUNFLOWER DR.
City-St-Zip: MARGATE, FL 33063 US

Title: S (X) Change () Addition
Name: SANDIDGE, SHARON,
Address: 7808 WEST SUNFLOWER DR.
City-St-Zip: MARGATE, FL 33063 US

Title: S (X) Change () Addition
Name: SANDIDGE, SHARON,
Address: 7808 WEST SUNFLOWER DR.
City-St-Zip: MARGATE, FL 33063 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK SANDIDGE

PDT

02/27/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date