

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L12142

FILED  
Mar 17, 2011  
Secretary of State

Entity Name: ACTION REPAIR, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

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

**OFFICERS AND DIRECTORS:**

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

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

Title: T  
Name: SANDIDGE, SHARON  
Address: 7808 WEST SUNFLOWER DR.  
City-St-Zip: MARGATE, FL 33063 US

I hereby 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 all other like empowered.

SIGNATURE: FRANK SANDIDGE

PDT

03/17/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date