

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000064301

1. Entity Name

Victor Auto Repair, Inc.

FILED

02 NOV 27 PM 1:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

600009237836  
11/27/02--01035--007 \*\*900.00

**REINSTATEMENT**  
DO NOT WRITE IN THIS SPACE 02

Principal Place of Business: 14266 SW 154 ST, MIAMI, FL 33177  
Mailing Address: 14266 SW 154 ST, MIAMI, FL 33177

2. Principal Place of Business: 13865 SW 142 AVE  
3. Mailing Address: 13865 SW 142 AVE  
Suite, Apt. #, etc.

City & State: MIAMI FL  
City & State: MIAMI FL  
Zip: 33186 Country: FLA  
Zip: 33186 Country: FLA

4. FEI Number: 05-1021149  
Applied For:  Not Applicable

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent: MIJARES, VICTOR, 14266 SW. 154 STREET, MIAMI, FL 33177

7. Name and Address of New Registered Agent: Name: VICTOR MIJARES, Street Address: 9950 SW. 88 ST. APT 4-H, City: MIAMI, FL, Zip Code: 33176

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:  VICTOR MIJARES, President 11/20/02  
(NOTE: Registered Agent signature required when reinstating)

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

FILE NOW! PREPARE STATEMENT OF ASSETS AND LIABILITIES FOR MAY 2004

10. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE: PD NAME: MIJARES, VICTOR STREET ADDRESS: 9950 SW 88 ST. APT 4-H CITY-ST-ZIP: MIAMI, FL 33176	<input type="checkbox"/> Delete
TITLE: D NAME: VALERA, HECTOR STREET ADDRESS: 13865 SW 142 AVE CITY-ST-ZIP: MIAMI, FL 33186	<input checked="" type="checkbox"/> Delete
TITLE: D NAME: TORO, ALBERT JOSE STREET ADDRESS: 10380 SW 213 ST #103 CITY-ST-ZIP: MIAMI, FL	<input checked="" type="checkbox"/> Delete
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  VICTOR MIJARES, President 11/20/02  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)

November 21, 2002

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Victor Auto Repair, Inc.  
P00000064301

To Whom It May Concern:

As request by your representative, enclosed please find copy of the 2002 Uniform Business Report along with a check in the amount of \$900.

As stated to your agent, we never received the business report form due to change of address. We have been in the new address for the past 2 years. The correct address is: 13865 S.W. 142 Ave., Miami, FL 33186.

If there is any possibility to waive the penalty, It would be greatly appreciated.  
Thanking you for your consideration.

Sincerely,

Victor Mijares  
President