

2007 FOR PROFIT CORPORATION ANNUAL REPORT

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000115115

Entity Name:
MANUEL LARGAESPADA AUTO REPAIR, INCPrincipal Place of Business
265 N.W. 21ST TERRACE
MIAMI, FL 33142 USMailing Address
210 S.W. 20TH AVE
MIAMI, FL 33135 US

Principal Place of Business - No P.O. Box

3. Mailing Address

State, Apt. #, etc.

State, Apt. #, etc.

04182007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number
06-1793892Applied For
No Application

Zip

Country

Zip

Country

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

TORRES, WILFREDO
100 ALTON ROAD
B
MIAMI BEACH, FL 33139ADDRESS CHANGE
ONLY

Name

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

2265 N.W. 21ST TERRACE

City

FL

Zip Code

33142

The above named entity subscribes and promises 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

Signature of Current Registered Agent

Signature of New Registered Agent

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.009. Election Campaign Financing
Financial Contributions ☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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10.1 NAME P LARGAESPADA, EDWIN M 2265 N.W. 21ST TERRACE MIAMI, FL 33142	11.1 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142
10.2 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142	11.2 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142
10.3 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142	11.3 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142
10.4 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142	11.4 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142
10.5 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142	11.5 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142
10.6 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142	11.6 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142
10.7 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142	11.7 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142
10.8 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142	11.8 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142
10.9 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142	11.9 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142
10.10 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142	11.10 NAME S DERIVET, CLAUDIA 2265 N.W. 21ST TERRACE MIAMI, FL 33142

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05/11/07--01013--020 **150.00

2. I hereby certify that the information furnished on this form is true and correct for the information contained in Chapter 119, Florida Statutes, I further certify that the information furnished on this report of Supplemental Information is true and correct and that my signature shall have the same legal effect as if made in person with, that I am an officer or director of the corporation or the individual owner of the corporation, and that my name appears in Block 10 or Block 11 of this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR