2004 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 20, 2004 8:00 am Secretary of State DOCUMENT # P97000017107 08-20-2004 90003 013 ***150.00 1. Entity Name PARS AUTO SALES & SERVICE, INC. Principal Place of Business 54069138 Mailing Address 1714 N. GOLDENROD ROAD BLDG B 1714 N. GOLDENROD ROAD BLDG B ORLANDO, FL 32807-8451 ORLANDO, FL 32807-8451 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08062004 CR2E034 (10/03) Cha-P City & State City & State 4. FEI Number Applied For 59-3426804 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired_ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RASHIDINIA, HABIBOLAH Street Address (P.O. Box Number is Not Acceptable) 300 HOUND RUN PL. CASSELBERRY, FL 32704-4710 City Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Due by September 8, 2004 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. D TITLE ☐ Delete TITLE Change Addition RASHIDINIA, HABIBOLAH NAME NAME 300 HOUND RUN PL. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CASSELBERRY, FL 327074710 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition AKBARI, ALI NAME NAME 1998 WATER LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAITLAND, FL 32751 CITY-ST-ZIP Delete TITLE Change TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete DITLE TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-78P ☐ Delete Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-S1-ZIP 12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

Alfred Ment 54069138

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 6, 2004

PARS AUTO SALES & SERVICE, INC. 1714 N. GOLDENROD ROAD BLDG B ORLANDO, FL 32807-8451

SUBJECT: PARS AUTO SALES & SERVICE, INC.

Ref. Number: P97000017107

Although you attempted to file your annual report form online, you did not successfully complete the process. Therefore, we are returning the enclosed check along with an annual report form for you to complete. Please return the completed form and check to this office for processing.

The fee to file the profit annual report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

The only provision the Division of Corporations has for waiver of the \$400.00 late fee is if the annual report notice was not received. A letter stating this fact must accompany the completed annual report.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Ruby Dunlap Document Specialist

Letter Number: 504A00049072

Attachment Dr. 72 P57000017107 54069138

From, pars AUTO rabs = service MS-17-04 TO: PL DEPT of STate

Dear Dept of state Rep; t never received

The renewal package in the mail, and

I totally had porgotten about it until my

accountant reminded me of. I tripe to do it on line, it was so confusing.

please waive the late fee sine it is not all my pawlt.

Schenely

Ali Ahlia

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FLORIDA DEPARTMENT OF STATE

Secretary of State
Glenda E. Hood
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314

St069/38

First-Class Mail U.S. Postage PAID State of Florida 84321

NOTICE OF INTENT TO DISSOLVE

PARS AUTO SALES & SERVICE, INC.

1714 N. GOLDENROD ROAD BLDG B

ORLANDO FL 32807-8400

C7 C3

To receive the form by mail:

- Detach this postcard.
- •• Enter address to mail report to, if <u>different</u> from preprinted mailing address.
 - Affix postage on reverse side and mail.
 - Allow 10-14 business days to receive form.

Document # P97000017107	Mail Report to:
PARS AUTO SALES & SERVICE, INC.	
1714 N. GOLDENROD DOOD BLDG B	
ORLANDO FL 32807 CASO	



Division of Corporations . РО вох ₆₁₉₈ Tallahassee, FL 32314-6198

Dear Sirs:

Ounce I completed the data entry to file online the Annual Report I was unable to CONTINUE for the payment with a Credit Card. To avoid any misunderstanding the payment is enclosed here with copy of the Receipt printed at time of filing. I hope this will be enough to complete our filing and payment.

Cordially,

Ali Akbari

Secretary-Treasurer

PARS AUTO SALES & SERVICE INC.

1714 N. Goldenrod Road, Bldg. B

Orlando, FL 32807-8400