2007 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 02, 2007 08:00 AM **Secretary of State DOCUMENT # P97000066079** 1. Entity Name 2 MAN AUTO REPAIR INC. Principal Place of Business Mailing Address 3815 HENDRICKS AVE. 3815 HENDRICKS AVE. JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32207 01112007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3463479 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent LARA, HECTOR DO NOT WRITE 3815 HENDRICKS AVE. JACKSONVILLE, FL 32207 IN THIS SPACE 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ¥157 F HECTOR, LARA NAME STREET ADDRESS 3815 HENDRICKS AVE. JACKSONVILLE, FL 32207 CITY-ST-ZIP TOTLE U00000617342 02/07/07-80070-022 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP IME NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is the 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 specieser 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 attac

SIGNATURE:

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