

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90982 003 ***150.00

DOCUMENT # P00000016857

1. Entity Name
BOSMENIER AUTO REPAIR, INC.



Principal Place of Business
1144 SW 8TH ST. REAR
MIAMI FL 33030

Mailing Address
1144 SW 8TH ST. REAR
MIAMI FL 33030

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0987012

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GARZON, EDGAR F
1144 SW 8TH STREET REAR
MIAMI FL 33130

Name JOSE J. GARZON
Street Address (P.O. Box Number is Not Acceptable)
1144 SW 8th Street Rear
City MIAMI FL Zip Code 33130

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]
Signature, typed or printed name of registered agent and date if applicable.

JOSE J. GARZON
(NOTE: Registered Agent signature required when reinstating)

4/21/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Delete
NAME GARZON, EDGAR
STREET ADDRESS 1144 SW 8TH ST. REAR
CITY-ST-ZIP MIAMI FL 33130

TITLE P ☐ Change ☒ Addition
NAME JOSE J. GARZON
STREET ADDRESS 1144 SW 8th St. (Rear) MIAMI-FL
CITY-ST-ZIP 33130

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Change ☒ Addition
NAME EZEQUIEL RIAL
STREET ADDRESS 1144 SW 8th St. (Rear) MIAMI-FL
CITY-ST-ZIP 33130

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Change ☒ Addition
NAME CARLOS CORNETO
STREET ADDRESS 1144 SW 8th St. (Rear) MIAMI-FL
CITY-ST-ZIP 33130

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE J. GARZON 4/21/03

Date

Daytime Phone #

305-
285-2333

CR2E034 (10/02)