

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L12142

**Entity Name:** ACTION REPAIR, INC.

**Current Principal Place of Business:**

% SHARON SANDIDGE  
7808 WEST SUNFLOWER DRIVE  
MARGATE, FL 33063

**Current Mailing Address:**

% SHARON SANDIDGE  
7808 WEST SUNFLOWER DRIVE  
MARGATE, FL 33063 US

**FEI Number:** 65-0143186

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SANDIDGE, SHARON  
7808 WEST SUNFLOWER DRIVE  
MARGATE, FL 33063 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PDT  
Name SANDIDGE, FRANK  
Address 7808 WEST SUNFLOWER DR.  
City-State-Zip: MARGATE FL 33063

Title S  
Name SANDIDGE, SHARON  
Address 7808 WEST SUNFLOWER DR.  
City-State-Zip: MARGATE FL 33063

Title T  
Name SANDIDGE, SHARON  
Address 7808 WEST SUNFLOWER DR.  
City-State-Zip: MARGATE FL 33063

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** FRANK SANDIDGE

**PRESIDENT**

**04/02/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date