

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000061661

**Entity Name:** BROTHER'S AUTO CARE, INC.

**Current Principal Place of Business:**

425 N DIXIE HWY  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

425 N DIXIE HWY  
POMPANO BEACH, FL 33060

**FEI Number:** 26-2886191

**Certificate of Status Desired:** No

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

SANTOS, ANTHONY  
4235 N UNIVERSITY DR  
# 101  
SUNRISE, FL 33351 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 P  
Name SANTOS, ANTHONY  
Address 4235 N UNIVERSITY DR # 101  
City-State-Zip: SUNRISE FL 33351

*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:** ANTHONY SANTOS

**OWNER**

**02/09/2015**

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

\_\_\_\_\_  
Date