

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000084024

**FILED**  
**Feb 02, 2018**  
**Secretary of State**  
**CC9245021296**

**Entity Name:** CERTIFIED AUTOMOTIVE REPAIR, INC.

**Current Principal Place of Business:**

2217 ANDREA LANE  
FORT MYERS, FL 33912

**Current Mailing Address:**

2217 ANDREA LANE  
FORT MYERS, FL 33912 US

**FEI Number:** 65-0708761

**Certificate of Status Desired:** No

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

ESPOSITO, RICKY J  
15940 S. PEBBLE LANE  
FORT MYERS, FL 33912 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	Title	S
Name	ESPOSITO, RICKY J	Name	ESPOSITO, CHRISTINE A
Address	15940 S. PEBBLE LANE	Address	15940 S. PEBBLE LANE
City-State-Zip:	FORT MYERS FL 33912	City-State-Zip:	FORT MYERS FL 33912

*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:** CHRISTINE ESPOSITO

**SEC**

**02/02/2018**

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

\_\_\_\_\_  
Date