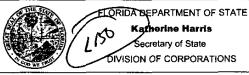
SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FILED Jul 27, 1999 8:00 am Secretary of State

07-27-1999 90031 024 ***150.00

1999 DOCUMENT #

1. Corporation Name

BOB'S BRAKE SERVICE, INC.

Principal Place of Business Mailing Address						اهما بالازم ردوان بالمان ربعاع بالأزم راهام
22 NW 79TH STREET 22 NW 79TH STREET MIAMI FL 33150-3014 MIAMI FL 33150-3014			=T			•
			14		DO NOT WRITE II	LTING COACE
					DO NOT WRITE IN	THIS SPACE
					3. Date Incorporated or Qualified 09/28/1972	
2 Dining	Hose of Ducinosa	2n Mailine Address			4. FEI Number	Applied For
_ '	lace of Business	2a. Mailing Addres	S		59-1487903	Not Applicable
Suite, Apt.	# etc	26 Suite, Apt. #, e	tr			\$8.75.Additional
22	#, uu.	27	···		-5Certificate of Status Desired	Fee Required
City & Stat	te	City & State		·	6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	C	ountry	8. This corporation owes the current y	ear ,
24	25	29	30		Intangible Personal Property.	Yes No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Regis	stered Agent
	15004 4444W/ ODA			81 Name		
FIGUEROA, MANNY CPA				82 Street Add	ress (P.O. Box Number is Not Acceptable)	
308 ALHAMBRA CIRCLE						
COF	VAL GABLES FL 33134-5004			83		Į.
				84 City		85 Zip Code
•						FL
11. Pursuan	t to the provisions of sections 607.05	02 and 607.1508, Florida	Statutes, the	bove-named corpo	oration submits this statement for the purposion's board of directors. I hereby accept the	se of changing its registered
office or agent. I	registered agent, or both, in the Stat am familiar with, and accept the obli	e of Fiorida. Such change gations of, section 607.05	e was authoriz 605, Florida St	ed by the corporati atutes.	ion's board of directors. I hereby accept the	appointment as registered
SIGNATURE		•				
	Signature, typed or printed name of registered ag			stered Agent signature req		DATE CONTROL IN CONTRO
12.		ND DIRECTORS	13		ADDITIONS/CHANGES TO OFFICE	
TITLE	PSD POSEDE W	L DELI	-1-	TITLE		Change Addition
NAME	IRVINE, ROBERT W.		1	NAME		\
STREET ADDRESS	416 N. RAINBOW DRIVE			STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33021			CITY-ST-ZIP TITLE		Observa Addition
TITLE		L DELI	- ' -			Change Addition
NAME		-		NAME STREET ADDRESS		1
STREET ADDRESS						Ĭ
CITY-ST-ZIP TITLE				CITY-ST-ZIP TITLE		Change Addition
NAME		L DEL		NAME		
STREET ADDRESS				STREET ADDRESS		
CITY-ST-ZIP				CITY-ST-ZIP		
TITLE		DEL		TITLE		Change Addition
NAME		DEF	-1-	NAME		C. Cucudo C. Manipoli
STREET ADDRESS				STREET ADDRESS		
CITY-ST-ZIP				CITY-ST-ZIP		
TITLE		OEL		TITLE		Change Addition
NAME		021	-'-	NAME		
STREET ADDRESS				STREET ADDRESS		
				CITY-ST-ZIP		
CITY-ST-ZIO						
CITY-ST-ZIP TITLE		DEI		TITLE		Change Addition
TITLE		DEL	ETE 6.1	TITLE		Change Addition
		DEL DEL	ETE 6.1 6.2			Change Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

July 9, 1999

Annual Report Filings
Division of Corporations
PO Box 6327
Tallahassee FL 32314

- To Whom It May Concern,

I'm writing this letter in regards to my fathers business Bob's Brake Service, Inc. My father passed away on May 18, 1999 my mother and I am trying to take care of his business paperwork. We just received a delinquent letter stating we have a \$400. fine. I spoke with Melissa at your office and she told me to send a check for \$150. with the Annual Report and to write a letter to your office asking if the delinquent charges can be waived in light of our situation. Your consideration would be greatly appreciated as we are doing our best to take care of all my fathers' business paperwork.

Thank you for your time and please contact me if I can be of further assistance at (954) 916-4066 or (954) 989-9814.

Sincerely,

Jeanne Irvine