

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90292 004 ***158.75

DOCUMENT # 530654

1. Entity Name
BUNCHE PARK AUTO & TRUCK REPAIRS, INC.



Principal Place of Business
16290 N.W. 27TH AVENUE
MIAMI, FL 33054

Mailing Address
16290 N.W. 27TH AVENUE
MIAMI, FL 33054

DO NOT WRITE IN THIS SPACE



03222006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1776367

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, GRADY
16290 NW 27TH AVENUE
MIAMI, FL 33054

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	JOHNSON, GRADY
STREET ADDRESS	16290 N.W. 27TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33054
TITLE	S
NAME	JOHNSON, SHEILA
STREET ADDRESS	16290 N.W. 27TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33054
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Sheila Johnson (SHEILA JOHNSON) GRADY Johnson, president 3/22/06