

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 15, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # 692414**

1. Entity Name  
**GINACHO'S AUTOMOBILE SERVICE, INC.**



Principal Place of Business  
**14221 SW 140 ST**  
**MIAMI, FL 33186 US**

Mailing Address  
**14221 SW 140 ST**  
**MIAMI, FL 33186 US**



02132007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2578564</b>	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**CENDOYA, IGNACIO**  
**10165 SW 111 STREET**  
**MIAMI, FL 33176**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PV CENDOYA, IGNACIO 10165 SW 111 STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CENDOYA, GINA ANN 10165 SW 111 STREET MIAMI, FL
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 02/26/07-80052-023-158.75

**DO NOT WRITE 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: *Ignacio Cendoya* *Gina Ann Cendoya* 2/13/07 (305) 251-5444  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #