

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F53667

FILED
Dec 10, 2009
Secretary of State**Entity Name:** MANOLO AUTO REPAIRS, INC.**Current Principal Place of Business:**9500 NW 77TH AVENUE
HIALEAH GARDENS, FL 33016 US**New Principal Place of Business:**9500 NW 77TH AVENUE, UNIT 5
HIALEAH GARDENS, FL 33016 US**Current Mailing Address:**9500 NW 77TH AVENUE
HIALEAH GARDENS, FL 33016 US**New Mailing Address:**9500 NW 77TH AVENUE, UNIT 5
HIALEAH GARDENS, FL 33016 US**FEI Number:** 59-2136822**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FERNANDEZ, MANUEL, A
4100 SW 147TH AVENUE
MIRAMAR, FL 33027 US**Name and Address of New Registered Agent:**FERNANDEZ, MANUEL A
4100 SW 147TH AVENUE
MIRAMAR, FL 33027 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: MANUEL A. FERNANDEZ

12/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: FERNANDEZ, MANUEL R.
Address: 4280 SW 137TH AVENUE
City-St-Zip: MIRAMAR, FL 33027**Title:** STD () Delete
Name: FERNANDEZ, ADRIANA E.
Address: 4280 SW 137TH AVENUE
City-St-Zip: MIRAMAR, FL 33027**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP () Change (X) Addition
Name: FERNANDEZ, MANUEL A.
Address: 4100 SW 147TH AVENUE
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ADRIANA E. FERNANDEZ

STD

12/10/2009

Electronic Signature of Signing Officer or Director

Date