2007 FOR PROFIT CORPORATION

FILED Apr 27, 2007 08:00 AM Secretary of State ANNUAL REPORT **DOCUMENT # F69379** 1. Entity Name LAKÉ PARK AUTO REPAIR SERVICE, INC. Principal Place of Business Mailing Address 1101 OLD DIXIE HIGHWAY 1101 OLD DIXIE HIGHWAY C/O GEORGE JACOBS C/O GEORGE JACOBS LAKE PARK, FL 33403 LAKE PARK, FL 33403 No Chg-P CR2E034 (11/05) 04242007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2163853 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JACOBS, GEORGE DO NOT WRITE 1101 OLD DIXIE HIGHWAY LAKE PARK, FL 33403 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 little if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE JACOBS, GEORGE NAME STREET ADDRESS 1101 OLD DIXIE HWY CITY-ST-ZIP LAKE PARK, FL TITLE U00000740102 05/14/07-80054-004 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP

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:

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IF

IN THIS SPACE

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