

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 697962

1. Entity Name
MIAMI GARDENS PROFESSIONAL CAR CARE, INC.

Principal Place of Business Mailing Address
1700 NW 183 STREET 20580 NE 6TH AVENUE
MIAMI, FL 33056 MIAMI, FL 33179

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 59-2531140 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARK STANLEY
1700 NW 183 STREET
MIAMI, FL 33056

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

10/22/01
DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/S
NAME MARK STANLEY
STREET ADDRESS 20580 NE 6TH AVENUE
CITY-ST-ZIP MIAMI, FL 33179

TITLE
NAME
STREET ADDRESS 200004677172--9
CITY-ST-ZIP -11/13/01--01078--030
***\$450.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: x MARK STANLEY, President, x 10/22/01 305
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 26 AM 9:53

DO NOT WRITE IN THIS SPACE

CR2034 (11/00)

MIAMI GARDENS PROFESSIONAL CAR CARE, INC.
20580 NE 6TH AVENUE
MIAMI, FLORIDA 33179

October 22, 2001

DIVISION OF CORPORATIONS
ANNUAL REPORTS SECTION
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

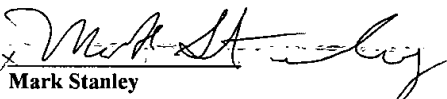
RE: Document #G97902

Gentlemen,

In respect to the renewal of the Corporate Charter of Miami Gardens Professional Car Care, Inc. for year 1999. Please note that we did not receive our Charter renewal notice from the State Department of Corporation for the year 1999. It was only after recent review of our records that we realize that our Charter was not renewed with the Department of State.

Enclosed is the renewal form along with the filing fee of Four Hundred and Fifty Dollars (\$450.00). We are asking you to please waive the late filing penalty base on the above circumstances.

Respectfully,


Mark Stanley
President,