

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J04364

(2)

1. Corporation Name

J C & SONS AUTO REPAIR, INC.

FILED

1995 JUL 25 AM 9:18

TALLAHASSEE, FLORIDA

Principal Place of Business
**2007 SOUTHWEST 100TH TERRACE
MIRAMAR FL 33025**

Mailing Address
**2007 SOUTHWEST 100TH TERRACE
MIRAMAR FL 33025**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/17/1986** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-2609589** Applied For ☐ Not Applicable ☐

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CERQUERA, JOSE JESUS
6481 SW 44 ST
MIAMI FL 33155**

01 Name **JUAN CORREA**

02 Street Address (P.O. Box Number is Not Acceptable)
8307 NW 201 STREET

03

04 City **MIAMI LAKES** FL 05 Zip Code **33016**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **JUAN CORREA** *Juan E. Correa* 6/6/95
Signature (Typed or printed name of registered agent and title, if applicable) (NOTE: Registered Agent signature required when amending.) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS, DIRECTORS, AND REGISTERED AGENT

TITLE **PD**
NAME **CERQUERA, JOSE J**
STREET ADDRESS **6481 SW 44 ST**
CITY, ST, ZIP **MIAMI FL**

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

☐ Change ☐ Addition
PRINTER

TITLE **TD**
NAME **RENIJO, GEROSE L**
STREET ADDRESS **19673 S OCEAN DR #129**
CITY, ST, ZIP **HALLANDALE FL**

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

☐ Change ☐ Addition
Delete

TITLE **D**
NAME **CORREA, JUAN E**
STREET ADDRESS **8307 NW 201 ST**
CITY, ST, ZIP **MIAMI LAKES FL**

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

☒ Change ☐ Addition
PRESIDENT

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

☐ Change ☒ Addition
LORENA CORREA - VP
8307 NW 201 ST
MIAMI LAKES FL 33016

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **JUAN CORREA** *Juan E. Correa* 6/6/95
Signature (Typed or printed name of signing officer or director) DATE