

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L41243

Entity Name: E & L AUTO COLLISION, INC.

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2181 N.W. 29TH STREET  
OAKLAND PARK, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

2181 N.W. 29TH STREET  
OAKLAND PARK, FL 33311

**New Mailing Address:**

FEI Number: 65-0169576

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOJICA, ELLEN M  
2760 N.E. 2ND AVE  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MOJICA, LUIS A  
Address: 2760 N.E. 2ND AVE  
City-St-Zip: BOCA RATON, FL 33431

Title: V  
Name: MOJICA, ELLEN M  
Address: 2760 N.E. 2ND AVE  
City-St-Zip: BOCA RATON, FL 33431

I hereby 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 all other like empowered.

SIGNATURE: LUIS MOJICA

P

04/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date