

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L98127

Entity Name: M & S CAR CARE, INC.

**FILED**  
**Mar 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

290 174 ST  
#1805  
N MIAMI BEACH, FL 33160 US

**New Principal Place of Business:**

**Current Mailing Address:**

290 174 ST  
#1805  
N MIAMI BEACH, FL 33160 US

**New Mailing Address:**

FEI Number: 65-0204757      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAS MOSHE  
290 - 174TH ST #1805  
N MIAMI BCH, FL 33160 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: PD  
Name: SAS, MOSHE  
Address: 290 -174 ST #1805  
City-St-Zip: N MIAMI BCH., FL

Title: STD  
Name: SAS, DALIA  
Address: 290 174 ST #1805  
City-St-Zip: N MIAMI BCH., FL

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: MOSHE SAS

PREN

03/11/2012

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

\_\_\_\_\_  
Date