2006 FOR PROFIT GURPORATION ANNUAL REPORT

DOCUMENT # P00000020943

DR. "G", ULTIMATE BMW REPAIR SPECIALIST, INC.



FILED Mar 24, 2006 8:00 am Secretary of State

03-24-2006 90026 040 ***150.00

Principal Place of Business

1750 N.W. 38TH AVENUE LAUDERHILL, FL 33311

Mailing Address

1750 N.W. 38TH AVENUE LAUDERHILL, FL 33311



03142006

No Chg-P

CR2E034 (11/05)

4. FEI Number			Applied For
65-1019548-	 	 4	Not Applicab

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOBBAN, NORMAN-A-7220 N.W. 44TH COURT

LUCILLE HYDE

6311 SW 7TH COURT LAUDERHILL, FL 33310-MARGATE, FL 33068

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

						arternational samouvers
	named entity submits this statement for the prions of registered agent.	ourpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with,	and accept
SIGNATURE_	Signature, typed or printed name of registered agent and tale	UCILLE HYDE, 1 applicable. (NOTE: Registered	V.P.	required when reinstating)	DATE	<u>2</u>
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS	04000000000000000000000000000000000000			30000 13103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HYDE, GLENROY 6311 SW 7 COURT MARGATE, FL 33068					-
IITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC HYDE, CORITHA 7426 S.W. 14TH PLACE N. LAUDERDALE, FL 33068					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	l	LUCILLE		DO	NOT WRITE	
ITILE NAME STREET ADDRESS CITY-ST-ZIP	VP HYDE, GLENVILLE 6311 SW 7 COURT MARGATE, FL 33068			IN '	THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP						
TITLE						

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 of 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.

STREET ADDRESS CITY-ST-ZIP

INIROY HUDE.