

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P00600035671**

1. Entity Name

E & G AUTOMOBILE REFINISH, CORP.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1750 NW 22ND ST.

Suite, Apt. #, etc.

3. Mailing Address

5935 N.E. 5TH AV.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

Country

Zip

Country

4. FEI Number

651019582

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

ELMER A. GUTIERREZ

Street Address (P.O. Box Number is Not Acceptable)

5935 N.E. 5TH AVE

City

MIAMI

FL

Zip Code

33137

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 resigning)

DATE

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P/D ELMER A. GUTIERREZ
5935 N.E. 5TH AVE
MIAMI, FL 33137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V/D GUILLERMO A RUIZ
5935 N.E. 5TH AVE
MIAMI, FL 33137**

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Elmer A. Gutierrez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/02

Date

Daytime Phone #

CR2004B (12/01)