

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 01, 2004 8:00 am**  
**Secretary of State**

09-01-2004 90005 034 \*\*\*150.00

**DOCUMENT # P00000055288**

1. Entity Name

DETAILZ-DETAILZ AUTOMOTIVE SERVICES, INC.



Principal Place of Business

2201 S E INDIAN STREET, B-1  
STUART, FL 34994

Mailing Address

2201 S E INDIAN STREET, B-1  
STUART, FL 34994

**54071267**



08302004

No Chg-P

CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-1031253

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CRUZ, STEVEN P  
2201 S E INDIAN STREET, #B-1  
STUART, FL 34994

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
CRUZ, STEVEN  
2201 SE INDIAN STREET  
STUART, FL 34994

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
V  
CRUZ, JANNETTE  
2201 SE INDIAN STREET  
STUART, FL 34994

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/30/04 772-223-6573

Attachment

54071267

Doc. # 00000055288

August 26<sup>th</sup>, 2004

Florida Department of State  
Div. of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Detailz-Detailz Automotive Services, Inc.  
FEIN#: 65-1031253  
Document #: P04000123129

Dear Sir or Madam:

Enclosed you will find my Florida Annual Report for the year 2004, and check for the annual filing fees of \$150.00. This return was not filed in error, as we never received our filing forms. Please abate the additional \$400.00 late filing fee as we had no intention of not filing these annual reports nor did we have any intention of not paying the annual fees. Please file these reports and re-instate my status on both of these corporations. Thank you for your time and attention in this matter.

Sincerely,



Steven Cruz  
President