

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

DOCUMENT # P00000076160

1. Entity Name

L & L AUTO BODY REPAIRS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10918 Southwest 188 Street

Suite, Apt. #, etc.

3. Mailing Address

10918 Southwest 188 Street

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33157

Country

Zip

33157

Country

4. FEI Number

65-1031054

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

SPIEGEL & UTRERA, P.A.

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

1840 Southwest 22 Street

4th Floor

City

Miami

FL

Zip Code

33145

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.

SPIEGEL & UTRERA, P.A.

SIGNATURE **By:**

Natalia Utrera, Vice President

(NOTE: Registered Agent signature required when reinstating)

DATE

5/14/03

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
**PSTD
Lawrence, Lynford
10918 Southwest 188 Street
Miami, Florida 33157**

TITLE
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300021383423
07/08/03--01041--010 **15.00

**DO NOT WRITE
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: 

Lynford Lawrence, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone

5/14/03

FILED

03 JUN 26 AM 9:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300021383423
07/08/03--01041--009 **450.00

CR2E034B (12/01)

AFFIDAVIT IN SUPPORT OF
REQUEST TO WAIVE THE
FLORIDA DEPARTMENT OF STATE
CORPORATE ANNUAL REPORT LATE FEES

STATE OF FLORIDA)
)
COUNTY OF MIAMI DADE)

1. Lynford Lawrence is the President of L & L AUTO BODY REPAIRS, INC., a Florida corporation, (hereinafter "Corporation").
2. That the Corporation was administratively dissolved by the Florida Department of State on August 31, 2001.
3. That the Corporation failed to file its 2001 Annual Report or pay the 2001 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
 - 3.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
 - 3.2 the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a procedure to administratively dissolve the Corporation.
4. The Corporation requests the Florida Department of State reinstate the Corporation upon the payment by the Corporation of its 2001, 2002 and 2003 Annual Report fees and the filing of its 2001, 2002 and 2003 Annual Reports, which are presented simultaneously with this Affidavit.
5. L & L AUTO BODY REPAIRS, INC. satisfies the requirements of the Florida Statutes 607.0401.
6. No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: 27th day of January, 2003

FURTHER, AFFIANT SAYETH NOT



L & L AUTO BODY REPAIRS, INC.

By: [Signature]
Lynford Lawrence, President
L 662-520-541-329-0

SWORN AND SUBSCRIBED

before me this _____ day of January, 2003.

[Signature]
Notary Public, State of Florida at Large

Printed Name: Ramon Garcia

Commission Expires: 1/7/06