

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 91096 015 ***150.00

DOCUMENT# P01000061426

1. Entity
MECHANIC HOUSE AUTO REPAIR CORP.



Principal Place of
10914 Winding Creek Lane
Boca Raton, FL 33428

Mailing
10914 Winding Creek Lane
Boca Raton, FL 33428

90054460

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-1119692

Applied For
Not Applicable

Zip

Country
USA

Zip

Country
USA

5. Certificate of Status ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of Now Registered Agent

JEAN N RAMOS
10914 Winding Creek Lane
Boca Raton, FL 33428

Name

Street Address (P O Box Number is Not Acceptable)

City

FL Zip Code

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 reinstating)

03/11/2003

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 may Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE ☐ Delete
NAME **P/T/D**
JEAN N RAMOS
STREET ADDRESS **10914 Winding Creek Lane**
CITY - ST - ZIP **Boca Raton, FL 33428**

TITLE ☐ Change ☒ Addition
NAME **VP/S/D**
DENIS RODRIGUEZ
STREET ADDRESS **10914 Winding Creek Lane**
CITY - ST - ZIP **Boca Raton, FL 33428**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

13. I hereby certify that the information supplied with this filing does not comply for the exemption stated in Section 119.07 (3)(f), 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 qualified by chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all of the like empowered.

SIGNATURE:

03/11/2003 (954) 420-0997