2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000074450

Entity Name: FOREST CITY AUTO REPAIR, INC.

FILED Jan 26, 2007 Secretary of State

Current Principal Place of Business: New Principal	Place of Business:
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145 JEWEL DR

ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

145 JEWEL DR

ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3734205 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JUANA, LIZARDO JUANA, LIZARDO 895 LAKE JACKSON CIR 145 JEWEL DR

APOPKA, FL 32703 US ALTAMONTE SPRINGS, FL 32714 US

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: JUANA LAZARDO 01/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PD (X) Change () Addition

 Name:
 JUANA, LIZARDO
 Name:
 MIGUEL, FERNANDEZ

 Address:
 895 LAKE JACKSON CIR
 Address:
 5143 REBECCA COURT

 City-St-Zip:
 APOPKA, FL 32703 US
 City-St-Zip:
 ORLANDO, FL 32810 US

Title: D () Delete Title: AVP (X) Change () Addition

Name: GONZALEZ, ISAAC Name: GONZALEZ, ISAAC Address: 145 JEWEL DR Address: 145 JEWEL DR

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: () Delete Title: AVP () Change (X) Addition

Name: Name: JUANA, LIZARDO
Address: Address: 145 JEWEL DR

City-St-Zip: City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUANA LIZARDO RA 01/26/2007