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FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

09-20-2004 90003 017 ***300.00
P01000078403

FILED
04 OCT -1 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04
54073235

DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000078403

1. Entity Name
Mobile Lube Techs, Inc.

W04-35176

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1010 S.W. 87 Court	1010 S.W. 87 Court
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, Florida	City & State: Miami, Florida
Zip: 33174 — Country: Miami-Dade	Zip: 33174 — Country: Miami-Florida

4. FEI Number: 65-1135282 ☐ 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. RICHARD HERVIS JR
Street Address (P.O. Box Number is Not Acceptable)
1840 Coral Way, 4th Floor 1010 SW 87 Ct
City: MIAMI FL Zip Code: 33174

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: 9-27-04

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
	President/Owner- Richard Hervis, Jr. 1010 S.W. 87 Court Miami, Florida 33174		
			DO NOT WRITE IN THIS SPACE

CR2E034B (12/02)

11. 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 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 #

Attachment

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September 17, 2004

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To Whom It May Concern:

Please is not fair that I did not receive the annual reports to paid my annual reports yearly

And now my corporation is dissolve and I have to paid penalties due to the fact that I

Never received the forms to do so I am enclosing a check in the amount of $300.00

Dollars for both annual reports hoping that with this you will reinstate my corporation

Again awaiting for your reponse I remain.

Sincerely Yours,

Ana M. Condis
Accountant