

02/03

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

Page 1 of 2
FILED

DOCUMENT # P01000087912

1. Entity Name

EMMANUEL PAINT BODY SHOP INC.

03 MAR 25 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5023 E 11 AVENUE

Suite, Apt. #, etc.
Ste 501

City & State
Hialeah, FL

Zip
33013

Country
USA

3. Mailing Address
SAME

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number
65-1136624

Applied For
☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name **Sanchez, Francisca**

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

5023 E 11 Avenue, Ste 501

City **Hialeah**

FL

Zip Code
33013

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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
**Sanchez, Francisca - Director
5023 E 11 Avenue, Ste 501
Hialeah, FL 33013**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**300015293433
04/03/03--01053--029 **150.00**

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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:

Francisca Sanchez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/20/02

305-442-4344

Date

Daytime Phone #

CR2E034B (12/01)

gr 3/31

Alina Chment
EMMANUEL PAINT & BODY SHOP INC. *Page 2 of 2*

Thursday, December 26, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Document# P01000087912

To Whom It May Concern:

We are requesting that you correct our records to show our company active. We filed on time and paid the \$150.00 registration fee required. We spoke to your office and we found out that you had sent us a letter requesting our FEIN and that you had not received a response. We never received the request so as per your offices' instruction, we have enclosed a new Uniform Report with the requested FEIN

Please update your records and let us know if you need anything else to clarify this matter. You may contact our accountants' office, Diaz & Associates, Inc., at 305-442-4344 and speak to Alina Diaz, if you have any further questions.

Sincerely,

Francisca Sanchez

Francisa, Sanchez
President

Encl.: 2002 Uniform Annual Report
CC: Diaz & Associates, Inc.