

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 09, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000018468  
 1. Entity Name  
 P.M. PLUS AUTO/TRUCK REPAIR, INC.



Principal Place of Business 4363 MELALEUCA LANE LAKE WORTH, FL 33461	Mailing Address 4363 MELALEUCA LANE LAKE WORTH, FL 33461
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01042007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 13-4217470	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 RODRIGUEZ, ORLANDO  
 4363 MELALEUCA LANE  
 LAKE WORTH, FL 33461

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ORLANDO RODRIGUEZ PRESIDENT [Signature] 1-4-7  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relinquishing) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees  
 U00000520220  
 01/10/07-80038-024 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, ORLANDO 4363 MELALEUCA LANE LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RODRIGUEZ, DIEGO 4363 MELALEUCA LANE LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD RODRIGUEZ, LUZ 4363 MELALEUCA LANE LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] ORLANDO RODRIGUEZ 1-4-7  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #