

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000024659

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** AUTO COLOR & COLLISION REPAIR, INC.

**Current Principal Place of Business:**

18190 SOUTH DIXIE HWY.  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

18190 SOUTH DIXIE HWY.  
MIAMI, FL 33157

**New Mailing Address:**

**FEI Number:** 01-0617664

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARRICABURU, LUIS  
18190 SOUTH DIXIE HWY  
MIAMI, FL 33157 US

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

CARRICABURU, ZOBEIDA  
18190 SOUTH DIXIE HWY  
MIAMI, FL 33157 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:** ZOBEIDA CARRICABURU

04/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CARRICABURU, ZOBEIDA  
**Address:** 18190 SOUTH DIXIE HWY  
**City-St-Zip:** MIAMI, FL 33157

I hereby 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 all other like empowered.

**SIGNATURE:** ZOBEIDA CARRICABURU

P

04/28/2011

Electronic Signature of Signing Officer or Director

Date