

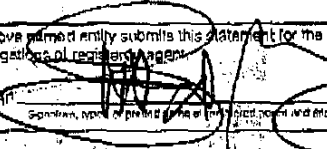
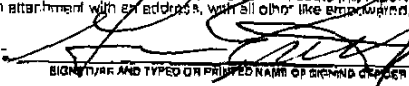
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GOREBELLI

FILED
Aug 03, 2004 8:00 am
Secretary of State

08-03-2004 90001 037 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000039369		
1. Entity Name BOCA MOBIL AUTO SERVICE, INC.		
Principal Place of Business 1990 N. DIXIE HWY. BOCA RATON, FL 33432		Mailing Address 1990 N. DIXIE HWY. BOCA RATON, FL 33432
DO NOT WRITE IN THIS SPACE		
5. Certificates of Status Desired ☐ \$8.75 Additional Fee Required		4. FRI Number 37-1427148
07302004 No Chg-P CR2E034 (10/03)		
6. Name and Address of Current Registered Agent GOLDBERG, ELLIOTT D ESQ. 2800 NE 49TH ST. FT. LAUDERDALE, FL 33308		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 		7/30/04 DATE
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		In accordance with s. 807.193(2)(b), F.S., the corporation did not receive the prior notice.
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD SPINO GATTI, GIOVANNI <i>2520 NE 17th St 33061</i> 2800 NE 49TH ST. Y <i>Perp m 03 2004</i> FT. LAUDERDALE, FL 33308	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or in an attachment with an address, with all other like empowerment.		
SIGNATURE: 		7-30-04 501-392-8656 Date
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Getting Filing #