


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2007 8:00 am
Secretary of State

03-16-2007 90034 050 ***150.00

DOCUMENT # P02000068107 1. Entity Name DANILO MOBIL AUTO REPAIR, INC.																																																																																																																																																											
Principal Place of Business 10430-8 E. COLONIAL DR ORLANDO, FL 32817			Mailing Address 9203-B E. COLONIAL DR. ORLANDO, FL 32817																																																																																																																																																								
2. Principal Place of Business - No P.O. Box # 6516 Old CHENey Hwy		3. Mailing Address Suite, Apt. #, etc.																																																																																																																																																									
City & State ORLANDO, FL		City & State		4. FEI Number 03-0460626																																																																																																																																																							
Zip 32807		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																																																							
6. Name and Address of Current Registered Agent ALMANZAR, DANILO 10430-8 E. COLONIAL DR ORLANDO, FL 32817				7. Name and Address of New Registered Agent Name ALMANZAR, DANILO Street Address (P.O. Box Number is Not Acceptable) 14716 LADY VICTORIA BLVD City ORLANDO FL Zip Code 32826																																																																																																																																																							
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 <u><i>Dani almanzar</i></u> <small>Signature, typed or printed name of registered agent and : if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. 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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: <u><i>Dani almanzar</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																																																																											
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