

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90110 022 ***158.75

DOCUMENT # P02000089778 1. Entity Name BONBERGER AUTOBODY & REPAIR INC.	
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Principal Place of Business 1335 W WASHINGTON ST ORLANDO, FL 32805	Mailing Address 1335 W WASHINGTON ST ORLANDO, FL 32805
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DO NOT WRITE IN THIS SPACE

14016079



03212005 No Chg-P CR2E034 (10/03)

4. FEI Number 73-4656202	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BAPTISTE, LUCIEN J
2605 OCILLA CT
ORLANDO, FL 32839

**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DESIR, LENET 5508 PARKHURST DR ORLANDO, FL 32808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LECONTE, BARSOLY 1335 W WASHINGTON ST ORLANDO, FL 32805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BAPTISTE, LUCIEN J 2605 OCILLA CT ORLANDO, FL 32839
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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lenet Desir 4/26/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

14016579**Division of Corporations****Annual Report**

The following is a review of the changes you are making for the filing of your Annual Report. Please verify the information for accuracy before submitting the document. Should you have additional corrections, use your browser 'BACK' button, make the necessary changes and use the 'CONTINUE' button again.

Document Number	P02000089778
Business Entity Name	BONBERGER AUTOBODY & REPAIR INC.
FEI Number	734656202
FEI Number Status	Current
Certificate of Status Desired	Yes
Election Campaign Financing Trust Fund Contribution	No

Principal Place of Business

Address	1335 W WASHINGTON ST
Suite, Apt. #, etc.	
City, State	ORLANDO, FL
Zip Code & Country	32805

Mailing Address

Address	1335 W WASHINGTON ST
Suite, Apt. #, etc.	
City, State	ORLANDO, FL
Zip Code & Country	32805

Name And Address of Registered Agent

Name (Last, First, Middle, Title)	DESIR, LENET
Address	5508 PARKHURST DRIVE
Suite, Apt. #, etc.	
City, State	ORLANDO, FL
Zip Code & Country	32808 US
Registered Agent Signature	LENET DESIR

Officer/Director Name And Address

Title	P
Name (Last, First, Middle, Title)	DESIR, LENET
Street Address	5508 PARKHURST DR
City, State	ORLANDO, FL

ATTACHMENT

Zip Code & Country

32808

1401679

Title

MR.

Officer/Director Signature

LENET DESH

P02 00089778

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