

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000128418

1. Entity Name

A PLUS AUTO COLOR, CORP.



FILED

03 OCT 27 PM 2:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
12262 SW 117TH COURT

Suite, Apt. #, etc.

3. Mailing Address  
12262 SW 117TH COURT

Suite, Apt. #, etc.

**REINSTATEMENT** 07

DO NOT WRITE IN THIS SPACE

City & State  
MIAMI, FL

City & State  
MIAMI, FL

4. FEI Number  
14-1860239

Applied For  
Not Applicable

Zip  
33186

Country

Zip  
33186

Country

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
MENDEZ, JUAN

Street Address (P.O. Box Number is Not Acceptable)

1185 NW 128 PLACE

City  
MIAMI

FL

Zip Code  
33182

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

MENDEZ, JUAN

02/22/2003

Signature of person who is not a registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
MENDEZ, JUAN  
1185 NW 128 PLACE, MIAMI FL 33182

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VSD  
MENDEZ, ELIZABETH  
1185 NW 128 PLACE, MIAMI FL 33182

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 on an attachment with an address, with authority to be empowered.

SIGNATURE:

JUAN MENDEZ

10/22/2003

305 253-5663

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR200248 (12/02)

21 10/30

***A PLUS AUTO COLOR, CORP.***

***12262 SW 117<sup>TH</sup> Court***

***Miami, FL 33186***

***Tel. (305) 253-5663***

***Fax (305) 253-9841***

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October 22, 2003

FLORIDA DEPARTMENT OF STATE -  
DIVISION OF CORPORATION

RE: A PLUS AUTO COLOR, CORP. /UBR 2003  
DOCUMENT #: P02000128418

To whom it may concern:

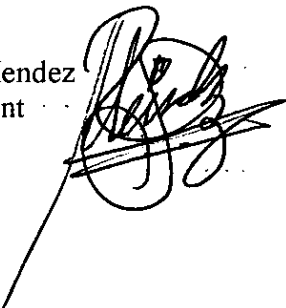
We never receive any notice of 2003 Uniform Business Report and for this reason we were not able to send this report on time. Please waive any penalties because is our first year doing this and we did not know that we had to send this report.

Attached you will find our 2003 Uniform Business Report and a check for \$158.75 to pay UBR of 2003.

Any questions or concerns feel free to contact us.

Sincerely Yours,

Juan Mendez  
President

A handwritten signature in black ink, appearing to be "Juan Mendez", written over a horizontal line.