

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 18, 2003 8:00 am
Secretary of State

08-18-2003 90175 035 ***150.00

DOCUMENT # P02000132206

1. Entity Name
MS AUTO REPAIR, CORP.



Principal Place of Business
**165 SW 32ND TERRACE
DEERFIELD BEACH, FL 33442**

Mailing Address
**165 SW 32ND TERRACE
DEERFIELD BEACH, FL 33442**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0562860

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DE SOUZA, MARCOS R
165 SW 32ND TERRACE
DEERFIELD BEACH, FL 33442**

Name

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

City

FL

Zip Code

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, 2003 Fee will be \$550.00
Amended UBR is \$81.25
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **DESOUZA, MARCOS R**
CITY-ST-ZIP **165 SW 32ND TERRACE
DEERFIELD BEACH, FL 33442**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

08/08/03

954/427/4770

CH2E034 (10/02)

Attachment

90151515
PO2000132206

MS AUTO REPAIR, CORP.

165 SW 32nd TERRACE - Deerfield Beach, FL 33442-2355

08/08/03

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood - Secretary of State
DIVISION OF CORPORATIONS
P.O. BOX 1500
Tallahassee, FL 32302-1500

Dear Mr. Glenda E. Hood;

I did NOT receive the UBR notice to file the 2003 fees, perhaps what may have caused this misunderstanding was the corporation name change amendment done in February.

Attached please find a copy of the UBR that we downloaded from the web site plus a check for \$150.00 for the annual fee. I am just following the instructions I received from your customer service today.

If you have any question please feel free to contact us.

I am hereby requesting that you REINSTATE my company as soon as possible.

Sincerely,


Marcos R DeSouza
President