

**2005 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Nov 22, 2005  
Secretary of State**

DOCUMENT# P03000031233

Entity Name: A & M AUTO REPAIR, CORP.

**Current Principal Place of Business:**

3099 NW 62 ST.  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

3099 NW 62 ST.  
MIAMI, FL 33147

**New Mailing Address:**

FEI Number: 94-3083236      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

REMIGIO, MELANIA  
3099 NW 62 ST.  
MIAMI, FL 33147      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: MELANIA REMIGIO

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: DE LOS SANTOS, ADRIANO  
Address: 3099 NW 62 ST.  
City-St-Zip: MIAMI, FL 33147

Title: V      ( ) Delete  
Name: REMINGIO, MELANIE  
Address: 3099 NW 62 ST.  
City-St-Zip: MIAMI, FL 33147

Title: T      ( ) Delete  
Name: AFRIDI, FARHAN  
Address: 3099 NW 62 ST.  
City-St-Zip: MIAMI, FL 33147

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADRIANO DE LOS SANTOS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

11/22/2005

\_\_\_\_\_  
Date