2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 12, 2007 08:00 A DOCUMENT # P03000069635 Secretary of State 1. Entity Name ACTION FIBERGLASS REPAIR, INC. Principal Place of Business Mailing Address 3824 38TH AVE. E. 3824 38TH AVE. E **BRADENTON FL 34208 BRADENTON FL 34208** 2. Principal Place of Business - No P.O Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) 4. FEI Number 57-1172182 Applied For City & State City & State Not Applicable Zip Country Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo PETERSON, ANGELA F Street Address (P.O. Box Number is Not Acceptable) 3824 38TH AVE. E. **BRADENTON FL 34208** Zip Coda City Fl 8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida. (am familiar with, and accept the obligations of registered agent SIGNATURE (NOTE: Registered Ageni signaturo required when reinstating) DATE stered agent and life r applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS PSTD Change Addition Delete THIC 11111 PETERSON, ANGELA F NAME NAMI 3824 38TH AVE. É. STREET LADDRESS STREET ADDRESS IJ00000664762 **BRADENTON FL 34208** CITY-ST-ZIP CITY-S1-7IP ☐ Defete ин: ₩И€ NAME NAME STREET ADDRESS STREET ADDRESS CITY-SJ-7IP CITY-ST-ZIP Delete TITLE Change Addition HILLE NAME NAME STREET ADORESS STREET ADDRESS CITY-SI-7/P CHY-SI ZIP ☐ Delete Change Addition THILE NAMI. STREET ADDRESS STREET ADDRESS CITY-S1-7(P CHY-ST-ZIP ☐ Delete Change Addition IIILE NAME NAMU STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-7IP ☐ Change Addition HILE ITHE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CHY-SI-7/P

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutos 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 eath; 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 Statutos; 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:

FILED