

# 2005 FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000050461

1. Entity Name  
S & A AUTO REPAIR, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 NOV 15 AM 8:30

Principal Place of Business  
10557 SE MARICAMP RD.  
SILVER SPRINGS SHORES  
OCALA, FL 34472

Mailing Address  
10557 SE MARICAMP RD.  
SILVER SPRINGS SHORES  
OCALA, FL 34472

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10282005

REIN-P

CR2E098 (6/04)

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SARJU, SEW H  
10557 SE MARICAMP RD.  
SILVER SPRINGS SHORES  
OCALA, FL 34472

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 file if applicable.

(NOTE: Registered Agent signature required when reinstating)

11/08/05

DATE

**FILE NOW!!! FEE IS \$750.00**  
**After January 1, 2006, Fee will be \$900.00**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
President  
Sew H Sarju  
19 Bahia Loop  
Ocala FL 34472

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
500061443283  
11/15/05--01060--012 \*\*150.00

☐ Change ☐ Addition

TITLE  
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STREET ADDRESS  
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CITY-ST-ZIP

☐ Change ☐ Addition

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:

Sew H Sarju

Sew H Sarju

11/08/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/2

10557 SE MARICAMP RD  
SILVER SPRINGS SHORES  
OCALA FL 34472  
NOVEMBER 08, 2005

TO WHOM IT MAY CONCERN:

I AM ATTACHING THE SIGNED 2005 FOR PROFIT CORPORATION  
REINSTATEMENT.

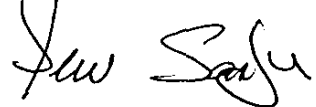
I WISH TO ADVISE YOU THAT I NEVER RECEIVED ANY PRIOR NOTICE FOR  
2005 AND AM REQUESTING THAT YOU PLEASE WAIVE THE \$600 PENALTY.

I AM ATTACHING A CHECK FOR \$150 TO COVER THE FEE THAT WOULD  
HAVE BEEN DUE IF I HAD RECEIVED THE NOTICE.

PLEASE ADVISE.

VERY TRULY YOURS,

S & A AUTO REPAIR INC



SEW H SARJU  
PRESIDENT

ATTACHMENTS