


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Aug 08, 2005 8:00 am**  
**Secretary of State**

07-08-2005 90022 043 \*\*\*158.75  
 08-08-2005 90048 014 \*\*\*400.00

**DOCUMENT # P04000060052**

1. Entity Name  
**FRUITLAND PARK AUTO REPAIR, INC.**



Principal Place of Business      Mailing Address  
 2780 HWY 441/27      2780 HWY 441/27  
 FRUITLAND PARK, FL 34731      FRUITLAND PARK, FL 34731

**50060487**



2. Principal Place of Business      3. Mailing Address  
**2780 Hwy 441/27**      **Same**

Suite, Apt. #, etc.      Suite, Apt. #, etc.

06202005      Chg-P      CR2E034 (10/03)

City & State      City & State  
**Fruitland Park, FL**      **FL**

Zip      Country  
**34731**      **Luka**

4. FEI Number      Applied For  
**20-0978308**      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required  
     

6. Name and Address of Current Registered Agent

**RAMJEET, HARRY**  
 2780 HWY 441/27  
 FRUITLAND PARK, FL 34731

7. Name and Address of New Registered Agent

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees      In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAMJEET, HARRY	NAME	
STREET ADDRESS	2780 HWY 441/27	STREET ADDRESS	
CITY-ST-ZIP	FRUITLAND PARK, FL 34731	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAMJEET, BACKTRAJ	NAME	
STREET ADDRESS	2780 HWY 441/27	STREET ADDRESS	
CITY-ST-ZIP	FRUITLAND PARK, FL 34731	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAMJEET, BARRAT	NAME	
STREET ADDRESS	2780 HWY 441/27	STREET ADDRESS	
CITY-ST-ZIP	FRUITLAND PARK, FL 34731	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAMJEET, BOODHRAM	NAME	
STREET ADDRESS	2780 HWY 441/27	STREET ADDRESS	
CITY-ST-ZIP	FRUITLAND PARK, FL 34731	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAMPHAL, DEVENDRA	NAME	
STREET ADDRESS	2780 HWY 441/27	STREET ADDRESS	
CITY-ST-ZIP	FRUITLAND PARK, FL 34731	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: *[Handwritten Signature]*      7-4-5      352-315-0901  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

*Harry Ramjeet*