2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000084081

Entity Name: AUTO REPAIR PLUS SERVICES CORP

FILED Jul 25, 2006 Secretary of State

6327 PINEY GLEN LANE 4908 OLD KARRY DRIVE ORLANDO, FL 32819 US ORLANDO, FL 32837 US

Current Mailing Address: New Mailing Address:

6327 PINEY GLEN LANE 4908 OLD KARRY DRIVE ORLANDO, FL 32819 US ORLANDO, FL 32837 US

FEI Number: 20-1178521 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

THORPE, LYSANDER 6327 PINEY GLEN LANE ORLANDO, FL 32819 US

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:

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PRES (X) Change () Addition

 Name:
 DE SOUZA, LUCIMAR C
 Name:
 SOUZA, JOSE M

 Address:
 4900 EAGLESMERE DR APT 136
 Address:
 4908 OLD KARRY DRIVE

 City-St-Zip:
 ORLANDO, FL 32819 US
 City-St-Zip:
 ORLANDO, FL 32837 US

Title: SD () Delete Title: SEC (X) Change () Addition
Name: SANTOS LARISSA Name: DE SOUZA LUCIMAR C

 Name:
 SANTOS, LARISSA
 Name:
 DE SOUZA, LUCIMAR C

 Address:
 4900 EAGLESMERE DR APT 136
 Address:
 4908 OLD KARRY DRIVE

 City-St-Zip:
 ORLANDO, FL 32819 US
 City-St-Zip:
 ORLANDO, FL 32837 US

Name: SOUZA, JOAO B Name: SOUZA, JOAO B

 Address:
 4900 EAGLESMERE DR APT 136
 Address:
 2143 LAKE DEBRA DR APT 1018

 City-St-Zip:
 ORLANDO, FL 32819 US
 City-St-Zip:
 ORLANDO, FL 32835 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOSE SOUZA PRES 07/25/2006