
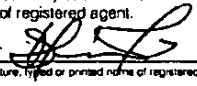
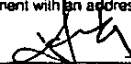


FILED
May 29, 2007 8:00 am
Secretary of State

05-01-2007 90013 044 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000094722		
1. Entity Name L & J AUTO SERVICE CORP.		
Principal Place of Business 6601 NW 32 AVE. MIAMI, FL 33147		Mailing Address 6601 NW 32 AVE. MIAMI, FL 33147
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent DIAZ, FELICIANO 7250 SW 14TH STREET NORTH LAUDERDALE, FL 33068		DO NOT WRITE IN THIS SPACE
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:  <i>Tenners</i> 4/17/07 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing) DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS DIAZ, FELICIANO 7250 SW 14TH STREET NORTH LAUDERDALE, FL 33068	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V ARIAS, DOMINGO 1301 N.W. 32ND AVE. MIAMI, FL 33125	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T RODRIGUEZ, RAMON 1300 S.W. 73RD PL MIAMI, FL 33144	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  Feliciano Diaz Presd 4/17/07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		