

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000135875

FILED
Mar 24, 2006
Secretary of State

Entity Name: PERCY'S COMPLETE AUTOMOTIVE REPAIR CENTER, INC

Current Principal Place of Business:

424 NORTH PINELLAS AVENUE
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

424 NORTH PINELLAS AVENUE
TARPON SPRINGS, FL 34689

New Mailing Address:

PO BOX 100
TARPON SPRINGS, FL 34688

FEI Number: 20-1679948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEREZ, HUGO
424 NORTH PINELLAS AVENUE
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

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: HUGO PEREZ

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:

Title: P () Delete
Name: PEREZ, HUGO
Address: 424 NORTH PINELLAS AVENUE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VP () Delete
Name: PALMIERI, ROBERT
Address: 424 NORTH PINELLAS AVENUE
City-St-Zip: TARPONS SPRINGS, FL 34689

Title: SEC (X) Delete
Name: RUE, LISA
Address: 424 NORTH PINELLAS AVENUE
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: RUE, LISA
Address: 424 NORTH PINELLAS AVENUE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HUGO PEREZ

Electronic Signature of Signing Officer or Director

P

03/24/2006

Date