2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2007 08:00 AM Secretary of State

ANNUAL REPORT				Apr 23, 200 / 08:00
DOCU	MENT # P04000160	740		Secretary of Stat
1. Entity Name T & L SERVICE REPAIR INC.				
			100	
Principal Plac	e of Business	Mailing Address		
13237 SW 8 Miami, FL 3	STH STREET 3186	13237 SW 85TH STREET Miami, Fl 33186		
				04072007 No Chg-P CR2E034 (11/05)
	O NOT WRITE	IN THIS SPA	CE	4. FEI Number Applied For
•				20-1963026 Not Applicable
				5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current R	egistered Agent	*	,
REYES, TITO L				DO NOT WRITE
13237 SW 85TH STREET MIAMI, FL 33186				IN THIS SPACE
				IN THIS SPACE
			<u> </u>	
8. The above named entity submits this statement for the appropse 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 Y				
	Signature typed or printed name of registered agent an	titile if applicable (NOTE Registere	id Agent signature equired	s when reinstating) DATE / [
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	Election Campaign Final Trust Fund Contribution.		.00 May Be ed to Fees
10.	OFFICERS AND D	RECTORS		
TITLE NAME	P REYES, TITO L			
STREET ADDRESS	13237 SW 85TH STREET			·
CITY-ST-ZIP	MIAMI, FL 33186		-	
NAME	REYES, JUDITH S			U00000726425
STREET ADDRESS CITY-ST-ZIP	13237 SW 85TH STREET MIAMI, FL 33186			05/04/07-80007-005 150.00
TITLE		•		
NAME STREET ADDRESS				
CITY-ST-ZIP				DO NOT WRITE
TITLE NAME				IN THIS SPACE
STREET ADDRESS			•	
CITY-ST-ZIP				, .
TITLE NAME				·
STREET ADDRESS				
CITY-ST-ZIP			1	
NAME			,	e é
STREET ADDRESS CITY-ST-ZIP				
12. I hereby o	certify that the information supplied with t	nis filing does not qualify for the ex	emptions contained	d in Chapter 119, Florida Statutes, I further certify that the information same legal effect as if made under oath; that I am ap officer or director.
or the cor	poration or the receiver or trustee empoy , or on an attachment with an address, wi	rerea la execule linis report as requi	red by Chapter 607	7. Florida Statutes, and that my name appears in Black 10 or Block 11 if
	1	<i>-</i>	M I	

The lle

Date

SIGNATURE;