## **2008 FOR PROFIT CORPORATION**

### **ANNUAL REPORT**

**DOCUMENT # P05000072546** 

AFFORDABLE AUTOMOTIVE REPAIR & SERVICES, INC.



Principal Place of Business

22876 NW 38TH AVE LAWTEY, FL 32058

Mailing Address

22876 NW 38TH AVE LAWTEY, FL 32058

# **FILED** May 01, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE
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04282008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2856894

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARRICK, RICHARD 22876 NW 38TH AVE LAWTEY, FL 32058

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	named entity submits this statement for the plions of registered agent.	urpose of changing its registe	red office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and a	accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registe	red Agent signature	(equired when reinstating)	DATE	_
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution		\$5.00 May Be Added to Fees	000000938676 05/27/08-80099-012 150.0	0
10. OFFICERS AND DIRECTORS						
TIFLE Name Street address City-St-Zip	P BARRICK, RICHARD 22876 NW 38TH AVE LAWTEY, FL 32058		- : 			
NAME STREET ADDRESS						

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12. Thereby 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:

TITLE NAME STREET ADDRESS

NAME STREET ADDRESS CITY-ST-ZIP THILE

CITY - ST- ZIP TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.29.08