

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90847 010 ***150.00

DOCUMENT # P05000080529

1. Entity Name
CENZO CAR CARE, INC.



Principal Place of Business
**1934 MEARS PKWY
POMPANO BEACH, FL 33063**

Mailing Address
**1934 MEARS PKWY
BLDG 9, APT. 27
POMPANO BEACH, FL 33063**

2. Principal Place of Business - No P.O. Box #
7848 N.W. 33rd ST.
Suite, Apt. #, etc.

3. Mailing Address
7848 N.W. 33rd ST.
Suite, Apt. #, etc.



04242007 Chg-P CR2E034 (12/06)

City & State
MARGATE FL
Zip
33063
Country
USA

City & State
MARGATE FL
Zip
33063
Country
USA

4. FEI Number
16-1726170

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CENZANO, PETE
1934 MEARS PKWY
POMPANO BEACH, FL 33063**

7. Name and Address of New Registered Agent

Name
CENZANO, PETE
Street Address (P.O. Box Number is Not Acceptable)
7848 N.W. 33rd ST.
City
MARGATE FL Zip Code
33063

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete
D	CENZANO, PETE	1934 MEARS PKWY	POMPANO BEACH, FL 33063	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
D	CENZANO, PETE	7848 N.W. 33rd ST.	MARGATE, FL 33063	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/07

Date

Daytime Phone #