

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000096381

FILED
Feb 01, 2007
Secretary of State

Entity Name: ROBERT'S AUTO REPAIR, INC

Current Principal Place of Business:

2340 SOUTH STATE ROAD 7
MIRAMAR, FL 33023 US

New Principal Place of Business:

Current Mailing Address:

6122 WASHINGTON STREET
SUITE 2
HOLLYWOOD, FL 33023 US

New Mailing Address:

FEI Number: 20-3191541 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EATON, ANDREAN R ESQ.
6122 WASHINGTON STREET
SUITE 2
HOLLYWOOD, FL 33023 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: ANDREAN EATON

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ELLISTON, ROBERT A
Address: 2907 NW 192 LANE
City-St-Zip: MIAMI GARDENS, FL 33055 FL

Title: VP () Delete
Name: WALLACE, LENFORD N
Address: 1321 NW 191 STREET
City-St-Zip: MIAMI GARDENS, FL 33169 FL

Title: SD () Delete
Name: WALKER, NORMAN L
Address: 9993 PERIWINKLE STREET
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ELLISTON, ROBERT A
Address: 19031 NW 12 AVENUE
City-St-Zip: MIAMI GARDENS, FL 33169 FL

Title: VP (X) Change () Addition
Name: WADE, GUYTON B
Address: 20200 NW 11 COURT
City-St-Zip: MIAMI GARDENS, FL 33169

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: ROBERT ELLISTON

P

02/01/2007

Electronic Signature of Signing Officer or Director

Date