

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 15, 2007 08:00 A
Secretary of State

DOCUMENT # P05000127099

1. Entity Name
ROBERTO'S AUTO REPAIR, INC.



Principal Place of Business
**1401 - 44TH AVENUE EAST
SHOP D
BRADENTON, FL 34203 US**

Mailing Address
**205 - 46TH AVENUE TERRACE WEST
APT. 424
BRADENTON, FL 34207 US**



05032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0319393	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**AYALA, ROBERTO A
205 - 46TH AVENUE TERRACE WEST
APT. 424
BRADENTON, FL 34207**

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

U00000764321
05/09/07 00052-011 150.00

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing --
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AYALA, ROBERTO A 205 - 46TH AVENUE TERRACE WEST APT. 424 BRADENTON, FL 34207
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**DO NOT WRITE
IN THIS SPACE**

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

5/1/07 941/727-6944
Date Daytime Phone #