2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 16, 2009
Secretary of State

DOCUMENT# P06000151392

Entity Name: PEREIRA-AUTO REPAIR CORPORATION

Current Principal Place of Business:

4901 DR. MARTIN LUTHER KING BLVD., #5
FT. MYERS, FL 33905

New Principal Place of Business:

4901 DR. MARTIN LUTHER KING BLVD.
5
FT. MYERS, FL 33905

Current Mailing Address:

5027 CHIQUITA BLVD.
CAPE CORAL, FL 33914

New Mailing Address:

FEI Number: 20-8006524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1100 S FEDERAL HWY
2ND FLOOR
DEERFIELD BEACH, FL 33441 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: TAX HOUSE CORPORATION
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: PEREIRA DA SILVA, JOSE
Address: 5027 CHIQUITA BLVD.
City-St-Zip: CAPE CORAL, FL 33914

Title: DV ( ) Delete
Name: SILVA, OZIEL
Address: 5027 CHIQUITA BLVD.
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOSE PEREIRA DA SILVA DP 10/16/2009
Electronic Signature of Signing Officer or Director Date