

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000043864

**FILED**  
**Dec 08, 2008**  
**Secretary of State**

**Entity Name:** ACTION AUTO CARE & MUFFLER SHOP INC

**Current Principal Place of Business:**

2348 KIRKWOOD AVE  
NAPLES, FL 34112

**New Principal Place of Business:**

**Current Mailing Address:**

2348 KIRKWOOD AVE  
NAPLES, FL 34112

**New Mailing Address:**

**FEI Number:** 94-3456896

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CONDOMINAS TAX SERVICE INC  
2804 SANTA BARBARA BLVD  
NAPLES, FL 34116 US

**Name and Address of New Registered Agent:**

VELOZ, MARIA J VP  
2348 KIRKWOOD AVE  
NAPLES, FL 34112 US

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: MARIA J. VELOZ

12/08/2008

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: P ( ) Delete  
Name: RIOS, CARLOS  
Address: 2210 39TH STREET SW  
City-St-Zip: NAPLES, FL 34117

Title: VP ( ) Delete  
Name: VELOZ, MARIA J  
Address: 2210 39TH STREET SW  
City-St-Zip: NAPLES, FL 34117

**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: MARIA J. VELOZ

VP

12/08/2008

Electronic Signature of Signing Officer or Director

Date