

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000053415

**FILED**  
**Mar 29, 2011**  
**Secretary of State**

**Entity Name:** ZACK'S AUTO REPAIR & TRANSMISSION SPECIALIST, INC.

**Current Principal Place of Business:**

4009 SW 52ND AVE  
PEMBROKE PARK, FL 33023

**New Principal Place of Business:**

2401 SW 31 AVENUE  
BAY E17 & E18  
HALLANDALE, FL 33009

**Current Mailing Address:**

4009 SW 52ND AVE  
PEMBROKE PARK, FL 33023

**New Mailing Address:**

7526 SW 6 STREET  
NORTH LAUDERDALE, FL 33068

**FEI Number:** 27-0443285

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SILBURN, ISAAC  
4009 SW 52ND AVE  
PEMBROKE PARK, FL 33023 US

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

SILBURN, ISAAC N  
7526 SW 6 STREET  
NORTH LAUDERDALE, FL 33068 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:** LORNA SILBURN

03/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** SILBURN, ISAAC N  
**Address:** 7526 SW 6 STREET  
**City-St-Zip:** NORTH LAUDERDALE, FL 33068

**Title:** S  
**Name:** SILBURN, LORNA V  
**Address:** 7526 SW 6 STREET  
**City-St-Zip:** NORTH LAUDERDALE, FL 33068

I hereby 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 all other like empowered.

**SIGNATURE:** LORNA SILBURN

S

03/29/2011

Electronic Signature of Signing Officer or Director

Date