


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90175 044 ***150.00

1. Entity Name WARD'S AUTO REPAIR SERVICE INC.	
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Principal Place of Business 1622 N. DIXIE HWY. HOLLYWOOD, FL 33020	Mailing Address 1622 N. DIXIE HWY. HOLLYWOOD, FL 33020
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DO NOT WRITE IN THIS SPACE



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4. FEI Number 65-0407783	Applied For
0000000000	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 00000000

6. Name and Address of Current Registered Agent

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000000000000000000

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 000000
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10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROBERT WARD
STREET ADDRESS	1622 N DIXIE HWY
CITY-ST-ZIP	HOLLYWOOD FL 33020
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Robert A Ward Date: 4/23/04 Daytime Phone #: 954 925 7711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR