

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 28, 2002 8:00 am**  
**Secretary of State**

07-28-2002 90174 039 \*\*\*150.00

**DOCUMENT # P93000055824**

1. Entity Name

**A & R AUTO SERVICE INC**

Principal Place of Business

**606 W MOWRY ST  
 HOMESTEAD FL 33030**

Mailing Address

**606 W MOWRY ST  
 HOMESTEAD FL 33030**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0276830**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**RIVERA, ANGEL A  
 606 W MOWRY ST  
 HOMESTEAD FL 33030**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00  
 After September 13, 2002 Fee will be \$750.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
 NAME **RIVERA, ANGEL A**  
 STREET ADDRESS **19990 SW 128 ST**  
 CITY-ST-ZIP **MIAMI FL 33196**

TITLE **SD** ☐ Delete  
 NAME **RIVERA, JOSEFINA**  
 STREET ADDRESS **19990 SW 128 ST**  
 CITY-ST-ZIP **MIAMI FL 33196**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**ANGEL A. RIVERA**  
 PRESIDENT

07-23-02

CR2E034 (4/02)

Attachment

#P9300005584/675410

JULY 23, 2002

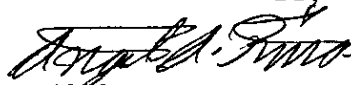
A & R AUTO SERVICE INC.  
606 W. MOWRY ST.  
HOMESTEAD, FL 33030

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P.O. BOX 1500  
TALLAHASSEE, FL 32302-1500

ATTENTION: GENTLEMEN

THIS IS TO INFORM YOU THAT MY LATE PAYMENT WAS  
UNINTENTIONAL, DUE TO THE FACT THAT I NEVER RECEIVED THE  
ANNUAL REPORT. IF YOU COULD WAIVE THE LATE FEE, IT WOULD BE  
KINDLY APPRECIATED.

SINCERELY,



ANGEL A. RIVERA  
PRESIDENT A & R AUTO SERVICE INC

