2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2001 8:00 am
Secretary of State
03-21-2001 90078 038 ***150.00

DOCUMENT # P93000085732

1. Entity Name
ACCURATE AUTO REPAIR, INC.

Principal Place of Business	Mailing Address
850 N.W. 57TH STREET FORT LAUDERDALE FL 33309	850 N.W. 57TH STREET FORT LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

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 65-0454235 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CONRAD S. KULATZ & ASSOCIATES P.A. 633 SE THIRD AVENUE SUITE 4R FORT LAUDERDALE FL 33301	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.

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

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 $150.00
After MAY 1, 2001 Fee will be $550.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHANSON, ARTHUR 850 N.W. 57TH STREET FORT LAUDERDALE FL 33309 ☐ Delete	☒ Change ☐ Addition 826 nw 57 ST FT LAUD. FL 33309
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHANSON, ROBERT 850 N.W. 57TH STREET FORT LAUDERDALE FL 33309 ☐ Delete	☒ Change ☐ Addition 826 nw 57 ST FT lAUD FL 33309
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in S. indicated on this report or supplemental report is true and accurate and that my signature shall have the of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 60 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Arthur Johnson Pres 3/14/01