2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 03, 2008 08:00 All Secretary of State **DOCUMENT # P94000042984** 1. Entity Name J & F AUTO REPAIR, INC. Principal Place of Business Mailing Address 4400 N. U.S. 1 4400 N. U.S. 1 COCOA, FL 32927 COCOA, FL 32927 01072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3256856 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent DE LA PASCUA, FERNANDO DO NOT WRITE 4400 N. U.S. 1 COCOA, FL 32927 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) U00000878957 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 04/15/08-80001-008 150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE DE LA PASCUA, FERNANDO NAME STREET ADDRESS 5025 BRIDGE RD CITY-ST-ZIP COCOA, FL 32927 TITLE CARRILLO, JOAQUIN NAME STREET ADDRESS 4425 OLYMPIC DR CITY-ST-ZIP COCOA, FL 32927 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 office

SIGNATURE:

CJTY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP