

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 08, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000045116

1. Entity Name

ACCURATE AUTO SERVICE, INC.



Principal Place of Business

2705 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020

Mailing Address

2705 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020



07022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0498408

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

EMANUELE, MARK A
3600 N. FEDERAL HIGHWAY, 3RD FLOOR
FT. LAUDERDALE, FL 33308

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE DPT
NAME LOPEZ, CHARLES W
STREET ADDRESS 2705 HOLLYWOOD BLVD.
CITY-ST-ZIP HOLLYWOOD, FL 33020

TITLE DVS
NAME WOODRUFF, LLYN
STREET ADDRESS 2705 HOLLYWOOD BLVD.
CITY-ST-ZIP HOLLYWOOD, FL 33020

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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07/08/04-80009-005 150.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-6-04
Pics 954-922-1568