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2007 FOR PROFIT CORPORATION ANNUAL REPORT

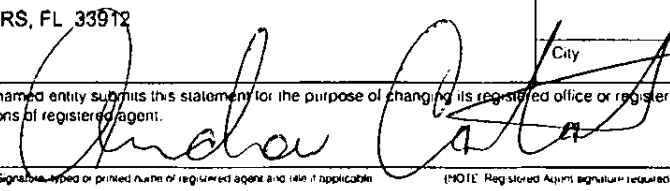
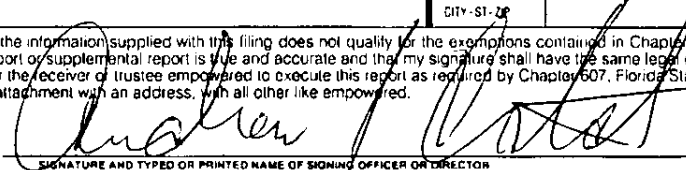
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 07



04102007 Chg-P CR2E034 (12/06)

DOCUMENT # P94000047254			
1. Entity Name ANDY'S AUTOMOTIVE REPAIR, INC.			
Principal Place of Business 12741 METRO PARKWAY SUITE 2 FORT MYERS, FL 33912 US		Mailing Address 12741 METRO PARKWAY SUITE 2 FORT MYERS, FL 33912 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0497519		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CATALANO, ANDREW J 12741 METRO PARKWAY STE-#2 FORT MYERS, FL 33912		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  DATE 10/25/07 Signature typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P CATALANO, ANDREW J 12741 METRO PKWY STE 2 FORT MYERS, FL 33912 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing 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 other like empowered.			
SIGNATURE: 		10/25/07 2395618697	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

11/6/07

Att Russ

Please ~~excuse~~ all the problems
Auburn been having with their Renewals

I did the others on line. It is done
this one is signed & faxed to you and mailed
thanks for your help

Andy Catalan

Pres Andy Town & Andy Automotive

239-561-8697 Call Re/Any question!