

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90071 038 ***150.00

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1. Entity Name
PIT STOP 10 MINUTE OIL CHANGE, INC.



Principal Place of Business
**2501 WEST SAMPLE ROAD
BAY A-1
POMPANO BEACH, FL 33073**

Mailing Address
**2501 WEST SAMPLE ROAD
BAY A-1
POMPANO BEACH, FL 33073**

40053931



01082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0549395

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**LISTRO, RICHARD
2501 WEST SAMPLE ROAD
BAY A-1
POMPANO BEACH, FL 33073**

*10844 La Salinas Cr
Boca Raton FL
33428*

**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
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

TITLE	D
NAME	LISTRO, RICHARD
STREET ADDRESS	2501 WEST SAMPLE ROAD
CITY-ST-ZIP	POMPANO BEACH, FL 33073
TITLE	VPS
NAME	LISTRO, PAULA
STREET ADDRESS	2501 W SAMPLE RD
CITY-ST-ZIP	PAOMPANO BEACH, FL 33073
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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: *Richard Listro*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/07

Date

561-756-1000

Daytime Phone #