

2004 FOR PRO... ANNUAL REPORT

DOCUMENT # P95000079978

1. Entity Name
MASTER TECH AUTO REPAIR, INC.



Principal Place of Business

911 N.W. 209TH AVE.
#135
PEMBROKE PINES, FL 33029

Mailing Address

911 N.W. 209TH AVE.
#135
PEMBROKE PINES, FL 33029

FILED
Apr 05, 2004 08:00 AM
Secretary of State



01112004 No Chg-P CR2E034 (10/03)

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4. FEI Number
65-0615144

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

KING, BART
2387 S.W. 177TH AVE.
MIRAMAR, FL 33029

**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, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
KING, BART
2387 SOUTHWEST 177TH AVENUE
MIRAMAR, FL 33029

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

U00000102291
04/05/04-80009-017 150.00

**DO NOT WRITE
IN THIS SPACE**

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 #

Bart King BART KING 4-2-04 954-436-5090