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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000097022

1. Corporation Name: *ENGINE REPAIR INCORPORATED.*
Principal Place of Business: *Florida 1905 NW 40th Ct Pompano Beach FL 33064*
Mailing Address:

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: *SAME*
3. Date Incorporated or Qualified: *Dec 18 1995*
4. FEI Number: *65-0628110*
5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing: ☐ \$5.00 May Be Added to Fees
7. This corporation owes the current year intangible Personal Property Tax: ☐ Yes ☐ No

8. Name and Address of Current Registered Agent: *Douglas Josephson*
5851 HANSEN HOLMBERG Rd
Parkland FL 33067

9. Name and Address of New Registered Agent:
81 Name:
82 Street Address (P.O. Box Number is Not Acceptable):
83 City:
84 FL 85 Zip Code:

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS: CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE	☐ DELETE	11. TITLE	☐ Change ☐ Addition
12. NAME		12. NAME	
13. STREET ADDRESS		13. STREET ADDRESS	
14. CITY-ST-ZIP		14. CITY-ST-ZIP	
15. TITLE	☐ DELETE	15. TITLE	☐ Change ☐ Addition
16. NAME		16. NAME	
17. STREET ADDRESS		17. STREET ADDRESS	
18. CITY-ST-ZIP		18. CITY-ST-ZIP	
19. TITLE	☐ DELETE	19. TITLE	☐ Change ☐ Addition
20. NAME		20. NAME	
21. STREET ADDRESS		21. STREET ADDRESS	
22. CITY-ST-ZIP		22. CITY-ST-ZIP	
23. TITLE	☐ DELETE	23. TITLE	☐ Change ☐ Addition
24. NAME		24. NAME	
25. STREET ADDRESS		25. STREET ADDRESS	
26. CITY-ST-ZIP		26. CITY-ST-ZIP	
27. TITLE	☐ DELETE	27. TITLE	☐ Change ☐ Addition
28. NAME		28. NAME	
29. STREET ADDRESS		29. STREET ADDRESS	
30. CITY-ST-ZIP		30. CITY-ST-ZIP	
31. TITLE	☐ DELETE	31. TITLE	☐ Change ☐ Addition
32. NAME		32. NAME	
33. STREET ADDRESS		33. STREET ADDRESS	
34. CITY-ST-ZIP		34. CITY-ST-ZIP	
35. TITLE	☐ DELETE	35. TITLE	☐ Change ☐ Addition
36. NAME		36. NAME	
37. STREET ADDRESS		37. STREET ADDRESS	
38. CITY-ST-ZIP		38. CITY-ST-ZIP	
39. TITLE	☐ DELETE	39. TITLE	☐ Change ☐ Addition
40. NAME		40. NAME	
41. STREET ADDRESS		41. STREET ADDRESS	
42. CITY-ST-ZIP		42. CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 807, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ronald F Colantonio* pres 7/15/99

CR2E034 (11/98)