

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000012932

Entity Name: BEACON AUTOCARE, INC.

**FILED**  
**Jan 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8701 NW 13TH TERR.  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

8701 NW 13TH TERR.  
MIAMI, FL 33172

**New Mailing Address:**

FEI Number: 65-0734270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PEREZ, ROSA  
8701 NW 13 TERRACE  
DORAL, FL 33172 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PEREZ, DAVID  
Address: 8701 NW 13 TERRACE  
City-St-Zip: MIAMI, FL 33172

Title: S  
Name: PEREZ, ROSY  
Address: 8701 NW 13 TERRACE  
City-St-Zip: MIAMI, FL 33172

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ROSA M. PEREZ

S

01/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date