

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90276 028 ***150.00

DOCUMENT # P97000017730

1. Entity Name
CROSSINGS AUTO CARE, INC.



Principal Place of Business
**13197 SW 112TH ST
MIAMI FL 33186
US**

Mailing Address
**8004 NW 154TH ST
STE. 141
MIAMI LAKES FL 33016
US**

2. Principal Place of Business

3. Mailing Address
7731 W. 7 AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
HIALEAH Florida

Zip

Country

Zip
33014

Country
U.S.A.

4. FEI Number
65-0732015

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HILL, JESUS
8004 NW 154TH ST
STE 141
MIAMI LAKES FL 33016**

Name

Street Address (P.O. Box Number is Not Acceptable)

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 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **4/22/03**

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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
**PCC
MANTECON, CARL E
8004 NW 154TH STREET #141
HIALEAH FL 33016** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
JESUS HILL
7731 W. 7 AVE.
HIALEAH FLA. 33014** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
HILL, JESUS S
8004 NW 154TH STREET #141
HIALEAH FL 33016** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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 another line empowered.

SIGNATURE: SIGNATURE REQUIRED **JESUS Hill** **4/10/03** **786 258 6631**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)