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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000022932 (2)

R & P AUTO REPAIR, INC.

FILED Apr 09 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing	Mailing Address					- 1 1065/600/ 1910 2011/ 1000/ 0051/ 0051/ 001// 001// 001// 101// 101// 101// 101// 101// 101//					
2101 NW 1	41 STREET. BAY 17	2101	2101 NW 141 STREET, BAY 17					ļ					
OPA LOCKA FL 33054			OPA LOCKA FL 33054					DO NOT WRITE IN THIS SPACE					
								3. Date Inco			IN THIS	SMACE	
								03/13	/1997	uanneu			
· ·	face of Business	<u> </u>	ling Address					4. FEI Numb			,	. A	pplied For
Suite, Apt.	# etc	26	Suite, Apt. #, etc.					65-0735336 Not Applicable					
22	w, etc.		27					5. Certificate	of Status De	sired			Additional equired
City & Stat	9		City & State					6 Floation C					·
23		<u>├</u>	28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country	Zip					8. This corporation owes or has paid the current year Intangible						
24	25	29		30					Property Tax of] No
	9. Name and Address of Curr	ent Registered	Agent		Ι.,			10. Name and	d Address of	New Reg	istered .	Agent	
PARKES, PERCIVAL					81	Nam	6	corac	Robe	-+<			
	101 NW 141 STREET, BAY 17		l e				t Addr	ess (P.O. Box Nu				.,	
0	PA LOCKA FL 33054						50		197	ری	<u> </u>		
					83		•						
					84	City	N.	MIAM	Bea	ch	FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.15	08, Florida Statu	tes, the a	bove	-name	d corn	oration submits t	his statement	for the pi	irnose of	changing i	ts registered
agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the ob-	igations of, sec	tion 607.0505, FI	orida Sta	tutes	ine cc	прогас	ION'S DOALD DE DIE	ectors, i nere	оу ассер	tine app	oiniment as	registered
SIGNATURE	Signature typed or projet name of regulated a	Spey P	a zna zna	If Rogistore	d Agn	at signat.	re requir	ed when reinstating)			DATE	10/98	
12.		ND DIRECTOR		13.	ci rigio	in oigrate	i e rectori		/CHANGES T	O OFFIC		DIRECTO	RS IN 12
TITLE	D		DELETE	1.1 TI	TLE		T					Change	Addition
NAME	PARKES, PERCIVAL			1.2 N	AME								
STREET ADDRESS	2101 NW 141 STREET, BA	Y 17		1.3 5	TAEET .	ADDRESS							
CITY-ST-ZIP	OPA LOCKA FL 33054			1.4 0	11Y-S1	r-ZiP							1
TITLE	D		DELETE	2 1 TI	TLE				,			Change	Addition
NAME	ROBERTS, GEORGE			2.2 N	AME								
STREET ADDRESS	50 NW 197 STREET			2.3 5	TAEET .	address	1						
CITY-ST-ZIP	NORTH MIAMI BEACH FL	33169			HTY-S	T-ZIP							
TITLE			☐ DELETE	3.1 10								☐ Change	Addition
NAME				3.2 N									
STREET ADDRESS						ADDRESS							
CITY+ST+ZIP TITLE			DELETE		ITY-S	T-ZIP	4					Па	14.100
NAME I			CT Deceie	4.1 TI								Change	Addition
NAME STREET ADDRESS				4.2 N		•000000							
CITY-ST-ZIP						ADDAESS							
TITLE			DELETE	5.1 TI	TY-ST	- ZIP	+					Change	Addition
NAME				5.1 II								□ ∩uaniha	Managan
STREET ADDRESS						ADDRESS							
CITY-ST-ZIP					TY-ST		1						
TITLE			DELETE	5.4 CI		- 215	 	 				Change	Addition
NAME				6.2 N/			1					- Unange	rwumon
STREET ADDRESS				- 1		ADDRESS							
CITY-ST-ZIP					TY-ST								
VIII VI-411				0.4 (-1	11-31	- ZIF							

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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Georga

Roberto

3/10/98

305-225 1492