

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P98000003946

1. Entity Name  
BENNY & ALLAN'S AUTOMOTIVE SERVICES, INC.



FILED

05 NOV 21 PM 4:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
5831 SW 70 ST  
MIAMI, FL 33143

Mailing Address  
5831 SW 70 ST.  
MIAMI, FL 33143

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

10202005 REIN-P CR2E098 (6/04)

4. FEI Number  
65-0805169

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

PAGE, BRUCE S  
1741 S.W. 138TH COURT  
MIAMI, FL 33175

7. Name and Address of New Registered Agent

Name  
Joseph Campel

Street Address (P.O. Box Number is Not Acceptable)  
6751 S.W. 38 STREET

City  
Miami

FL Zip Code  
33155

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

(NOTE: Registered Agent signature required when reinstating)

11/17/2005  
DATE

**FILE NOW!!! FEE IS \$750.00**  
**After January 1, 2006, Fee will be \$900.00**

10. OFFICERS AND DIRECTORS

TITLE  
NAME PD  
STREET ADDRESS MARTINEZ, BENICIO  
CITY-ST-ZIP 8514 S.W. 102ND PLACE  
MIAMI, FL 33173

☐ Delete

TITLE  
NAME VPD  
STREET ADDRESS BORRAJERO, ALLAN R  
CITY-ST-ZIP 14508 S.W. 156TH TERRACE  
MIAMI, FL 33177

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME BORRAJERO, ALLAN R.  
STREET ADDRESS 15201 SW 139 COURT  
CITY-ST-ZIP Miami, FL 33177

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ 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 all other like empowered.

SIGNATURE:

Allan R Borrajero  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/31/05 (305) 667-8863