PROFIT CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	P98000009	591
1. Corporation Name		

## FILED Apr 22, 1999 8:00 am Secretary of State

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1. Corporation	on Name	,0000.	0001			_			
U.S. RE	PAIR & PURCHASING	CO.							
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Principal Plac	e of Business	M	ailing Address					(#1 <b>#</b> 11 <b>18 181</b> )	D: ((B) : <b>(0)</b>
13851 SW 84T			851 SW 84TH COURT						
MIAMI FL 33158 MIAMI FL 33158							_		
						DO NOT WRITE	IN THIS SPAC	E	
						3. Date incorporated or Qualifed			
						01/30/1998		A 21	
-	Place of Business	— —	Mailing Address			4. FEI Number 0812555	<b>-</b> ⊦	Applie	policable
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Suite, Apt	. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		ee Requi	
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City & Sta	it <del>a</del>		Oily & Saile			Election Campaign Financing     Trust Fund Contribution		5.00 Ma dded to F	
3 Zip	Country		Zip	Cour	ntry	8. This corporation owes the current			
4	25	29	<b>-</b>	30	·····•	Personal Property Tax.	Year III Zangisk		No
41	9. Name and Address of		itered Agent	130]	<u> </u>	10. Name and Address of New Reg			
	Haling with Manage of				81 Name				
KU	KER, HOWARD L								
	0 SO. DADELAND BLVD SI	UITE 508			82 Street Add	tress (P.O. Box Number is Not Acceptable	7)		1
MIA	MI FL 33156			(	83				
	•								
							FL  85	Zip Cod	16
11. Pursuant office or	t to the provisions of Sections 6 registered agent, or both, in the	807.0502 and 6 e State of Florid	07.1508, Florida Star	tutes, the at	bove-named comby the corporation	poration submits this statement for the pur ion's board of directors. I hereby accept the		ing its reg as regist	pistered ered
					bove-named con I by the corporati utes.	poration submits this statement for the purion's board of directors. I hereby accept the		ing its reg as regist	!
SIGNATURE	Signature, typed or printed name of regis	stered agent and title	if applicable. (NC		bove-named con by the corporat ites.		rpose of chang ne appointment		!
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1. 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 affect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Via Florance REWicker Khoury

4-15-99

305-251-7301

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Davime Phone #