

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000023029

1. Entity Name  
J & M TRUCK REPAIR, INC.

FILED

02 JUN 10 PM 1:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
140 SW 1ST AVE  
Suite, Apt. #, etc.

3. Mailing Address  
140 SW 1ST AVE  
Suite, Apt. #, etc.  
POMPANO-FL

City & State  
POMPANO BCH - FL  
Zip 33060 Country USA BROWARD

City & State  
POMPANO-FL  
Zip 33060 Country USA

4. FEI Number  
650824157

Applied For  
Not Applicable

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

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

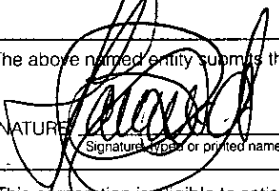
**7. Name and Address of Current Registered Agent**

Name JOSUE C. DA SILVA

Street Address (P.O. Box Number is Not Acceptable)  
3765 NE 18th AVE

City POMPANO BCH FL Zip Code 33060

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.

SIGNATURE   
(Signature of registered agent or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

05-31-02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**11. OFFICERS AND DIRECTORS**

TITLE NAME  
MARILIA S. LIMA - PRESIDENT  
STREET ADDRESS  
3765 NE 18 AVE  
CITY-ST-ZIP  
POMPANO BCH- FL- 33064

TITLE NAME  
400005893394--2  
STREET ADDRESS  
-06/20/02--01083--006  
CITY-ST-ZIP  
\*\*\*\*450.00 \*\*\*\*450.00

TITLE NAME  
VICE-PRESIDENT  
STREET ADDRESS  
JOSUE C. DA SILVA  
CITY-ST-ZIP  
3765 NE 18 AVE - POMPANO-FL-33064

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
351.25 - AR  
STREET ADDRESS  
10.00- ARARTS  
CITY-ST-ZIP

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
88.75 - ARS43P  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:  MARILIA S. LIMA  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-31-02 954-786-5252  
Date Daytime Phone #

CR2E034B (12/01)

**J&M Truck Repair, Inc.**

140 SW 1<sup>st</sup> Ave.  
Pompano Beach, FL 33060  
Phone: (954) 786-5252  
Fax: (954) 786-5305

P520f2

April 19, 2002

Department of State  
Division of Corporations  
409 East Gaines St.  
Tallahassee, FL 32399

To Whom It May Concern:

Our Corporation has no record of the receive of the Annual Report for the year 2000. We request the waive and penalty fee and accept our application for renewal at this time. JM Truck number P98000023029 est. 03/09/1998.

Sincerely,

  
Madina Lima  
President

M.O. 173362306