

2002 **FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90158 015 ***150.00

DOCUMENT # P98000100641

1. Entity Name
AIA Auto Service & Repair, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
12278 S.W. 117th Court

3. Mailing Address
12278 S.W. 117th Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, FL

City & State
Miami FL

4. FEI Number
65-0880215

Applied For
Not Applicable

Zip
33186

Country
U.S.A.

Zip
33186

Country
U.S.A.

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Ibarra Ricardo

Street Address (P.O. Box Number is Not Acceptable)
12278 S.W. 117th Ct.

City
Miami

FL

Zip Code
33186

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 **Ricardo Ibarra**

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

(NOTE: Registered Agent signature required when reinstating)

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 **SD**
NAME **Ibarra, Ricardo**
STREET ADDRESS **12278 S.W. 117th Ct.**
CITY-ST-ZIP **Miami, FL 33186**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **BD**
NAME **Ibarra Douglas**
STREET ADDRESS **7951 S.W. 40th Street, Suite 206**
CITY-ST-ZIP **Miami, FL 33155**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Deleted**
NAME **Ibarra, Maria**
STREET ADDRESS **7951 S.W. 40th Street, Suite 206**
CITY-ST-ZIP **Miami, FL 33155**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
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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 **Ricardo Ibarra** (X) **4-24-02** (X) **305-255-8076**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)