

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000010427

Entity Name: ENAR AUTO REPAIR, INC.

FILED  
Apr 26, 2006  
Secretary of State

**Current Principal Place of Business:**

2735 N.W. 7TH ST.  
MIAMI, FL 33125

**New Principal Place of Business:**

**Current Mailing Address:**

9967 SW 27TH TERR  
MIAMI, FL 33165

**New Mailing Address:**

FEI Number: 65-0892046

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANCHEZ, AMARILYS  
9967 SW 27 TERR.  
MIAMI, FL 33165 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: SANCHEZ, JOAQUIN E  
Address: 9967 SW 27TH TERR  
City-St-Zip: MIAMI, FL 33165

Title: DP ( ) Delete  
Name: SANCHEZ, AMARILYS  
Address: 9667 SW 27TH TERR.  
City-St-Zip: MIAMI, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMARILYS SANCHEZ

PRES

04/26/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date