

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000036832

Entity Name: OSCAR AUTO REPAIR, INC.

FILED
Apr 18, 2007
Secretary of State

Current Principal Place of Business:

940 S.W. 69TH AVENUE
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

940 S.W. 69TH AVENUE
MIAMI, FL 33144

New Mailing Address:

FEI Number: 65-0912952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAROLD, JEROME D
9999 N.E. 2ND AVE. STE. 118
MIAMI SHORES, FL 33138 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: VP () Delete
Name: HAROLD, JEROME D
Address: 940 S.W. 69TH AVENUE
City-St-Zip: MIAMI, FL 33144

Title: P () Delete
Name: PLATON, EDUARDO
Address: 743 S WINNING CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33326

Title: S () Delete
Name: PLATON, ALEJANDRO D DR
Address: 16361 SW 10TH ST
City-St-Zip: PEMBROKE PINES, FL

Title: T () Delete
Name: FUENTES, JOSEFINA
Address: 14213 SW 510 ST
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JEROME HAROLD

P

04/18/2007

Electronic Signature of Signing Officer or Director

Date