

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 19, 2006 8:00 am
Secretary of State

07-19-2006 90003 010 ***150.00

DOCUMENT # P99000056966

1. Entity Name
AUTOMATIC TRANSMISSION REMANUFACTURING, INC.



Principal Place of Business
**7490 NW 68 ST
MIAMI, FL 33166**

Mailing Address
**7490 NW 68 ST
MIAMI, FL 33166**

40099941



07052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0930283

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ZABALA, LUIS
3130 S.W. 107TH AVENUE
MIAMI, FL 33165**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
ZABALA, LUIS
3130 S.W. 107TH AVENUE
MIAMI, FL 33165**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
DIAZ, ELIO
3130 S.W. 107TH AVENUE
MIAMI, FL 33165**

TITLE
NAME
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

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JULY 11/2006 **305-887-0661**
Date Daytime Phone #

ATTACHMENT



AUTOMATIC TRANSMISSION ReMANUFACTURING

40099941

#P99000056966

July 11, 2006

Florida Department of State

To Whom It May Concern:

Please find enclosed check #1057 for the For Profit Corporation Annual Report in the amount of \$150.00, the required fee. We at Automatic Transmission Remanufacturing were not notified nor received notice of a requirement to file for this report on or before May 1, 2006. Please accept payment for the For Profit Corporation Annual Report for the required amount of \$150.00 and, by grace, waive the \$400 penalty. Thank you.

Sincerely,

Luis Zabala

Automatic Transmission Remanufacturing