2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

02-24-2003 90177 028 *****8.75
03-31-2003 90289 016 ***141.25

90066585

DOCUMENT # S03567

1. Entity Name
C & R AUTO REPAIR, CORP.

Principal Place of Business
12204 SW 129TH CT.
MIAMI FL 33186

Mailing Address
12204 SW 129TH CT.
MIAMI FL 33186

2. Principal Place of Business: Same
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address: Same
Suite, Apt. #, etc.
City & State
Zip | Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0220402 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
HERRERIAS, RAFAEL
13200 SW 53 ST
MIAMI FL 33175

7. Name and Address of New Registered Agent
Name: Eduardo Guzman
Street Address (P.O. Box Number is Not Acceptable): 15245 S.W. 99 ct.
City: miami FL Zip Code: 33157

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: Eduardo Guzman PD DATE: 1/8/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	HERRERIAS, RAFAEL	
STREET ADDRESS	8724 S.W. 134TH PLACE	
CITY-ST-ZIP	MIAMI FL	
TITLE	President	☐ Delete
NAME	Eduardo Guzman	
STREET ADDRESS	15245 S.W. 99 ct.	
CITY-ST-ZIP	miami, FL 33157	
TITLE	Nivaldo E. Capote	☐ Delete
NAME	VP	
STREET ADDRESS	12475 S.W. 128 AV.	
CITY-ST-ZIP	miami, FL 33184	
TITLE	Leonardo Hernandez	☐ Delete
NAME	VP	
STREET ADDRESS	9414 S.W. 185 St.	
CITY-ST-ZIP	miami, FL 33157	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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Paid Ck 150 3/7/03

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Eduardo Guzman PD 1/8/03 (305) 254-7343
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #