

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # S40704

1. Entity Name
AUTOMOTIVE SERVICE BY MIKE, INC.



Principal Place of Business
622 A 2ND LANE
VERO BEACH, FL 32962

Mailing Address
622 A 2ND LANE
VERO BEACH, FL 32962



04092005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0301295

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FANARO, RONALD S.
7555 20TH STREET
VERO BEACH, FL 32968

**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 \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE DPT
NAME INGRASSIA, MICHAEL I.
STREET ADDRESS 216 15TH AVE.
CITY-ST-ZIP VERO BEACH, FL

TITLE DVP
NAME INGRASSIA, CONNIE J.
STREET ADDRESS 216 15TH AVE.
CITY-ST-ZIP VERO BEACH, FL

TITLE S
NAME INGRASSIA, CONNIE J.
STREET ADDRESS 216 15TH AVE.
CITY-ST-ZIP VERO BEACH, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael I Ingrassia
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

michael I Ingrassia

000000302190
04/13/05-80063-011 150.00

**DO NOT WRITE
IN THIS SPACE**

4-10-05 772-569-2491
Date Daytime Phone #