FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V31715

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90215 069 *****8.75 04-27-1999 90215 070 ***150.00

MIGHTY	TUNE-UP & AUTO REPAI	RS, INC.					
					, 11		
		A4 4 A11				ii afeii dian dibii bibii	
Principal Place	•	Mailing Address					
4130 NW 135 ST. 4130 NW 135 ST. BAY "A" BAY "A"							-
BAY "A" BAY "A" MIAMI FL 33054 MIAMI FL 33054				DO NOT WRITE IN THIS SPACE			
US US					3. Date Incorporated or Qualifed		,
					04/24/1992		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Ar	plied For
26					65-0336280	· No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	, \$8.75	
22	. "	27			3. Certificate of Status Desired	Fee Re	equired
City & State City & State					6. Election Campaign Financing	- · \$5:00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Coul	ntry	8. This corporation owes the current y		
24	25		30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curr	ent Registered Agent		04 N	10. Name and Address of New Regis	stered Agent	
פרי	HIDA CEDADOO			81 Name			
	iura, gerardo)1 NW 77 CT			82 Street A	ddress (P.O. Box Number is Not Acceptable)		
					- Andrews	<u> </u>	
MIA	WI FL 33015			83		•	
				84 City		85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute) -		FL 🐃	
agent. I a	Signature, typed or printed name of registered a	gent and title if applicable. (NOTE:	Registered			DATE	
12.	· · · · · · · · · · · · · · · · · · ·	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE	PD	☐ DELETE	1.1 TIT			☐ Cilailge	Magazini.
NAME	SEGURA, GERARDO		1.2 NA	1			
STREET ADDRESS	18801 NW 77 CT			REET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33015			Y-ST-ZIP		Change	Addition
TITLE	VS	☐ DELETE	2.1 TIT			[] Citalige	☐ Addition
NAME	SEGURA, DEBORAH	-	2.2 NA		•	*	
STREET ADDRESS	18801 NW 77 CT	•		REET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33015	O DELETE	_	TY-ST-ZIP		Change	Addition
TITLE _		☐ DELETE	3.1 TIT				
NAME ~			3.2 NA				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		☐ DELETE	3.4. CI 4,1 TIT	TY-ST-ZIP		☐ Change	☐ Addition
TITLE		C) Detere			•		
NAME			4.2N				
STREET ADDRESS		•		REET ADDRESS			
CITY-ST-ZIP	,	☐ DELETE	_	TV-ST-ZIP		☐ Change	Addition
TITLE		El nere le	5.1 TIT 5.2 NA	1	•		
NAME				1		÷ .	
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP	<u> </u>	DELETE	5.4 CI	ry-ST-ZIP		☐ Change	Addition
TITLE		C) DECEIE	6.2 NA			onange	
NAME							
STREET ADDRESS				REET ADORESS	•		
CITY OT 710	I to the second		■ 6.4 ClT	TY-ST-ZIP			

14. 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 annual report or supplemental annual 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an oddress, with all other like empowered.

SIGNATURE: