

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # V34267

1. Entity Name
PAGE'S AUTO SERVICE, INC.



Principal Place of Business
152 GEORGIA AVE
TAVERNIER, FL 33070 US

Mailing Address
7725 SW 144TH ST
MIAMI, FL 33158



01112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0344714

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BLUM, SAMUEL SPENCER
2666 TIGERTAIL AVE.
STE. 106
COCONUT GROVE, FL 33133

**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 reappointing)

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	D
NAME	PAGE, PAUL A
STREET ADDRESS	115 PUEBLO ST
CITY-ST-ZIP	TAVERNIER, FL
TITLE	D
NAME	MURPHY, DANIEL P
STREET ADDRESS	7725 SW 144TH ST
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	MURPHY, CAROL P
STREET ADDRESS	7725 SW 144TH ST
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	PAGE, NANCY
STREET ADDRESS	115 PUEBLO ST
CITY-ST-ZIP	TAVERNIER, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000182666
01/18/05-80037-011 150.00

**DO NOT WRITE
IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/05 305-8523310
Date Daytime Phone #