

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000107091

**Entity Name:** ALVAREZ TRANSMISSION & AUTO REPAIR, INC.

**Current Principal Place of Business:**

1193 ENTERPRISE DRIVE, SUITE 203  
PORT CHARLOTTE, FL 33953

**Current Mailing Address:**

1193 ENTERPRISE DRIVE, SUITE 203  
PORT CHARLOTTE, FL 33953 US

**FEI Number:** 45-4140998

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ALVAREZ, ANIBAL A  
1193 ENTERPRISE DRIVE, SUITE 203  
PORT CHARLOTTE, FL 33953 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name ALVAREZ, ANIBAL A  
Address 1471 GLENVIEW RD  
City-State-Zip: NORTH PORT FL 34288

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANIBAL ALVAREZ

**OWNER**

**05/06/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date