

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000005816

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: I-95 AUTO REPAIR INC.

## Current Principal Place of Business:

1800 SW 100 AVE  
BAY E  
MIRAMAR, FL 33025 US

## New Principal Place of Business:

## Current Mailing Address:

1800 SW 100 AVE  
BAY F  
MIRAMAR, FL 33025 US

## New Mailing Address:

FEI Number: 65-0385395      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATRICE, RONALD  
18302 NW 11 ST  
PEMBROKE PINES, FL 33029 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: CHATELAIN, PATRICK  
Address: 2210 W ALCAZAR DR  
City-St-Zip: MIRAMAR, FL 33023

Title: S ( ) Delete  
Name: WILNER, L C  
Address: 7231 RAMONA ST  
City-St-Zip: MIRAMAR, FL 33023

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICK CHATELAIN

OWNE

03/24/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date