



BA20250423610



STATE OF CALIFORNIA Office of the Secretary of State STATEMENT OF INFORMATION CORPORATION

California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448 For Office Use Only

-FILED-

File No.: BA20250423610 Date Filed: 2/28/2025

| Entity Details | | | | |
|---|--|--|------------------------------------|--|
| Corporation Name | | OEM CALIBRATIONS | | |
| Entity No. | | 6600061 | | |
| Formed In | | CALIFORNIA | | |
| Street Address of Principal Office of Co | orporation | | | |
| Principal Address | | 901 N FAIRFAX AVE LOS ANGELES, CA 90046 | | |
| Mailing Address of Corporation | | | | |
| Mailing Address | | 901 N FAIRFAX AVE LOS ANGELES, CA 90046 | | |
| Attention | | | | |
| Street Address of California Office of Corporation Street Address of California Office | | None | | |
| Officers | | | | |
| Officer Name | Officer Address | | Position(s) | |
| + Darwin D Davoodi | 901 N FAIRFAX AVE LOS ANGELES, CA 90046 | | Chief Executive Officer, Secretary | |
| + Araik D Davidian | 901 N FAIRFAX AVE | | Chief Financial Officer | |

| Officer Name | Officer Address | Position | Stated Position | |
|--------------|-----------------|----------|-----------------|--|
| None Entered | | | | |

Directors

| Director Name | Director Address | |
|--------------------|--|--|
| + Darwin D Davoodi | 901 N FAIRFAX LOS ANGELES, CA 90046 | |

The number of vacancies on Board of Directors is: 0

Agent for Service of Process

Agent Name DARWIN DAVOODI

Agent Address 901 N FAIRFAX AVE
LOS ANGELES, CA 90046

LOS ANGELES, CA 90046

Type of Business

Type of Business Calibration on vehicles and trucks

Email Notifications

Opt-in Email Notifications

No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.

Labor Judgment

| No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code. | | | | | |
|---|------------|--|--|--|--|
| Electronic Signature | | | | | |
| By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign. | | | | | |
| Darwin D Davoodi | 02/28/2025 | | | | |
| Signature | Date | | | | |
| | | | | | |