## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F62414

Entity Name: K & N FOREIGN AUTO SERVICE, INC.

FILED Feb 04, 2004 Secretary of State

**Current Principal Place of Business:** 

C/O NEIL SIBBLIES 10492 S.W. 187TH TERRACE

MIAMI, FL 33157

**Current Mailing Address:** 

C/O NEIL SIBBLIES 10492 S.W. 187TH TERRACE

MIAMI, FL 33157 US

FEI Number: 59-2161843

FEI Number Applied For ( )

FEI Number Not Applicable ( )

MIAMI, FL 33157

**New Mailing Address:** 

MIAMI, FL 33157 US

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

**NEIL SIBBLIES** 

8620 S.W. 180 ST. MIAMI, FL 33157

Name and Address of New Registered Agent:

**New Principal Place of Business:** 

10492 S.W. 187 TH TERRACE

10492 S.W. 187 TH TERRACE

SIBBLIES, NEIL O PRES 8620 S.W. 180 ST. MIAMI, FL 33157

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: NEIL SIBBLIES

Electronic Signature of Registered Agent

02/04/2004

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: () Delete SIBBLIES, NEIL, Name: 8620 S.W. 180 ST. Address: City-St-Zip: MIAMI, FL 33157

Title: DS () Delete SIBBLES, SHARAINE Name:

8620 S.W. 180 ST. Address: MIAMI, FL 33157 City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition

SIBBLIES, NEIL O PRES Name: 8620 S.W. 180 ST. Address: City-St-Zip: MIAMI, FL 33157 US

Title: DS (X) Change ( ) Addition Name: SIBBLIES, SHARAINE A SEC

Address: 8620 S.W. 180 ST. MIAMI, FL 33157 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NEIL SIBBLIES DP 02/04/2004