2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # J32926

1. Entity Name

AUTÓ TRIM DESIGN OF SUNCOAST, INC.



US

FILED Mar 17, 2008 08:00 A Secretary of State

Principal Place of Business

6718 14TH STREET WEST BRADENTON, FL 34207

Mailing Address

6718 14TH STREET WEST BRADENTON, FL 34207



02252008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-1746859

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, WILLIAM G AUTO TRIM DESIGN OF SUNCOAST INC 6718 14TH ST W BRADENTON EL 34207

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DIVABLITI	ON, 1 E 04207		,			e e e e e e e e e e e e e e e e e e e
	e named entity submits this statement for the patient of registered agent.	ourpose of changing its register	ed office or r	egistered agent, or bo	oth, in the State of Fiorida. I am	familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agant and tible	ıf app≋cable. (NOTE: Registere	d Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT DAVIS, WILLIAM G 807 PLUM TREE LANE SARASOTA, FL 34243			·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DAVIS, GRACE E. 6718 14TH STREET WEST BRADENTON, FL 34207		5		000000859742 04/02/08-80034-1	018 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					NOT WRITE	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

NAME STREET ADDRESS CITY-ST-ZIP

ŇAMË STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

Date