

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000046706

Entity Name: AUTO PROFITS-R-US INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

6115 SANCTUARY GARDEN BLVD
PORT ORANGE, FL 32128

New Principal Place of Business:

Current Mailing Address:

6115 SANCTUARY GARDEN BLVD
PORT ORANGE, FL 32128

New Mailing Address:

FEI Number: 45-0478580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECKERT, RAY
6115 SANCTUARY GARDEN BLVD
PORT ORANGE, FL 32128 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: P () Delete
Name: ECKERT, RAY
Address: 6115 SANCTUARY GARDEN BLVD.
City-St-Zip: PORT ORANGE, FL 32128

Title: S () Delete
Name: FRYE, DAVENNE
Address: 6426 LONGLAKE DRIVE
City-St-Zip: PORT ORANGE, FL 32128

Title: VP () Delete
Name: ECKERT, DEANNE
Address: 6115 SANCTUARY GARDEN BLVD.
City-St-Zip: PORT ORANGE, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: RAY ECKERT

P

04/30/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date