

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155867

FILED
May 09, 2005
Secretary of State

Entity Name: CAPITOL AUTO SALES INC.

Current Principal Place of Business:

13170 ATLANTIC BLVD., STE. 58
JACKSONVILLE, FL 32225

New Principal Place of Business:

1800 MAYPORT ROAD
ATLANTIC BEACH, FL 32233

Current Mailing Address:

13170 ATLANTIC BLVD., STE. 58
JACKSONVILLE, FL 32225

New Mailing Address:

1800 MAYPORT ROAD
ATLANTIC BEACH, FL 32233

FEI Number: 56-2490280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDINA, EDUARDO
1800 MAYPORT ROAD
ARTLANTIC BEACH, FL 32233 US

Name and Address of New Registered Agent:

MEDINA, EDUARDO
1800 MAYPORT ROAD
ATLANTIC BEACH, FL 32233 US

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: EDUARDO A. MEDINA

05/09/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: LORA, FRANKLIN
Address: 272 BEACH BROOK STREET
City-St-Zip: JACKSONVILLE, FL 32259

Title: S/D () Delete
Name: MEDINA, EDUARDO
Address: 272 BEACH BROOK STREET
City-St-Zip: JACKSONVILLE, FL 32259

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: MEDINA, EDUARDO
Address: 272 BEACH BROOK STREET
City-St-Zip: JACKSONVILLE, FL 32259

Title: VP/D (X) Change () Addition
Name: LORA, FRANKLIN
Address: 272 BEACH BROOK STREET
City-St-Zip: JACKSONVILLE, FL 32259

Title: S/D () Change (X) Addition
Name: MEDINA, EDUARDO A
Address: 272 BEECH BROOK ST.
City-St-Zip: JACKSONVILLE, FL 32259

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: EDUARDO MEDINA

P/D

05/09/2005

Electronic Signature of Signing Officer or Director

Date