

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000026916

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** ANITA & SHAM AUTO SALES AND REPAIR, INC.

**Current Principal Place of Business:**

22494 WEEKS BLVD.  
LAND O' LAKES, FL 346394682 US

**New Principal Place of Business:**

**Current Mailing Address:**

22494 WEEKS BLVD.  
LAND O' LAKES, FL 346394682 US

**New Mailing Address:**

FEI Number: 32-0306870

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SAHADEO, ANITA  
22494 WEEKS BLVD.  
LAND O' LAKES, FL 346394682 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SAHADEO, ANITA  
Address: 22494 WEEKS BLVD.  
City-St-Zip: LAND O' LAKES, FL 346394682 US

Title: VP  
Name: SAHADEO, ROYNEAUTH  
Address: 22494 WEEKS BLVD.  
City-St-Zip: LAND O' LAKES, FL 346394682 US

I hereby 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 all other like empowered.

SIGNATURE: ANITA SAHADEO

P

04/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date