


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Jan 18, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P96000101594  
 1. Entity Name  
 BRADEN RIVER AUTOMOTIVE INC.



Principal Place of Business Mailing Address  
 5129 53RD AVE. EAST (SR 70) 5129 53RD AVE. EAST (SR 70)  
 BRADENTON, FL 34203 BRADENTON, FL 34203

**DO NOT WRITE IN THIS SPACE**



01142008 No Chg-P CR2E034 (11/05)  
 4. FEI Number 65-0723201 Applied For Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 DE PASTINO, EUGENE  
 8932 MANOR LOOP #203  
 BRADENTON, FL 34202

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

U00000789713  
 01/23/08-80004-014 158.75

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DE PASTINO, EUGENE
STREET ADDRESS	8932 MANOR LOOP #203
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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.

SIGNATURE: *Eugene Pastino* 1-15-08 9417398145  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #