


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 16, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000007448


1. Entity Name  
 AUTOMATED SUBS CORP.



Principal Place of Business      Mailing Address

30328 CORTEZ BLVD.      30328 CORTEZ BLVD.  
 RIDGE MANOR WEST, FL 34602 US      RIDGE MANOR WEST, FL 34602 US

**DO NOT WRITE IN THIS SPACE**



04102008      No Chg-P      CR2E034 (11/05)

4. FEI Number 59-3426543	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

MOLLICA, FRANK  
 30328 CORTEZ BLVD  
 BROOKSVILLE, FL 34602

**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 \_\_\_\_\_

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

40000063854  
 04/20/08 08547 008 150.00

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	MOLLICA, FRANK
STREET ADDRESS	30328 CORTEZ BLVD.
CITY - ST - ZIP	RIDGE MANOR WEST, FL 34602
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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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: Frank Mollica, Frank Mollica      4/15/2008      407-397-1991

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #