


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000075101
 1. Entity Name
 AUTO AMERICA, INC.



| | |
|---|---|
| Principal Place of Business 1945 SUNSET PT. ROAD CLEARWATER, FL 33765 | Mailing Address 1945 SUNSET PT. ROAD CLEARWATER, FL 33765 |
|---|---|

DO NOT WRITE IN THIS SPACE



01072004 No Chg-P CR2E034 (10/03)

| | |
|---|--------------------------------|
| 4. FEI Number 59-3468054 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent
 GIANFILIPPO, JOHN
 1945 SUNSET PT RD.
 CLEARWATER, FL 33756

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]* JOHN GIANFILIPPO DATE: 2-9-04
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PDT GIANFILLIPO, JOHN F 1945 SUNSET PT. ROAD CLEARWATER, FL 33765 |
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12. I hereby certify that the information supplied with this filing does not qualify 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 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: *[Signature]* JOHN GIANFILIPPO DATE: 2-9-04 DAYTIME PHONE #: 727-224-9885
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR