## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** May 03, 2004 08:00 AN Secretary of State

Daytima Phone #

1. Entity Nam F & P AU	TO SALES, INC.	Mailing Address 9793 SOBT 10 ORLANDO, FL 32837		The state of the s	Secreta	ny or state
***	O NOT WRITE I	CE	04292004 4. FEi Numb 59-355	er	234 (10/03)  Applied For Not Applicable \$8.75 Additional Fee Required	
CORTES, FABIAN 9793 S. OBT STE. 10 ORLANDO, FL 32837			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 tills if applicable  (NOTE Registered Agent signature required when reinstating)  DATE						
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.			ncing \$5.	.00 May Be ed to Fees	U0000014698 05/03/04-80081	31 7-005 150 <b>.0</b> 0
10.  HITLE NAME STREET ADDRESS CITY-SI-ZIP HITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND DIRI PD CORTES, FABIAN 9793 S. OBT #10 ORLANDO, FL 32837 STD CORTES, MONIK 9793 S. OBT #10 ORLANDO, FL 32837	CTORS				
ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP	E ET ADDRESS -ST-ZIP E E ET ADDRESS			DO NOT WRITE IN THIS SPACE		
NAME SIREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 turther 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR