

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000016899

Entity Name: T N T USED AUTO SALES, INC.

FILED  
Jan 13, 2006  
Secretary of State

## Current Principal Place of Business:

289 PONDELLA RD  
NORTH FORT MYERS, FL 33903

## New Principal Place of Business:

289 PONDELLA RD  
NORTH FORT MYERS, FL 33903 US

## Current Mailing Address:

2585 SURFSIDE BLVD  
CAPE CORAL, FL

## New Mailing Address:

289 PONDELLA RD  
NORTH FORT MYERS, FL 33903 US

FEI Number: 75-3101306

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MANGIONE, PHIL  
2585 SURFSIDE BLVD  
CAPE CORAL, FL US

## Name and Address of New Registered Agent:

MANGIONE, PHIL  
2585 SURFSIDE BLVD  
CAPE CORAL, FL 33914 US

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: PHIL MANGIONE

01/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: MANGIONE, PHIL  
Address: 2585 SURFSIDE BLVD  
City-St-Zip: CAPE CORAL, FL

Title: V (X) Delete  
Name: SOLIERI, THOMAS  
Address: 2585 SURFSIDE BLVD  
City-St-Zip: CAPE CORAL, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change ( ) Addition  
Name: MANGIONE, PHIL  
Address: 2585 SURFSIDE BLVD  
City-St-Zip: CAPE CORAL, FL 33914 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PHIL MANGIONE

DPTS

01/13/2006

Electronic Signature of Signing Officer or Director

Date