


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 07, 2005 08:00 AM**  
**Secretary of State**

|                                                                |                                                                                   |
|----------------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # 206524<br>1. Entity Name<br>BOYNTON AUTO SUPPLY INC |  |
|----------------------------------------------------------------|-----------------------------------------------------------------------------------|

|                                                                                |                                                                    |
|--------------------------------------------------------------------------------|--------------------------------------------------------------------|
| Principal Place of Business<br>422 E BOYNTON BCH BLVD<br>BOYNTON BCH, FL 33435 | Mailing Address<br>422 E BOYNTON BCH BLVD<br>BOYNTON BCH, FL 33435 |
|--------------------------------------------------------------------------------|--------------------------------------------------------------------|



01202005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

|                                                           |                                       |
|-----------------------------------------------------------|---------------------------------------|
| 4. FEI Number<br>59-0821570                               | Applied For<br>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<br><br>VALDEZ, GEORGE<br>4932 MISTY PINES TRAIL<br>LAKE WORTH, FL 33463 | <b>DO NOT WRITE<br/>IN THIS SPACE</b> |
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

|                                                                                     |                                                                                                                        |                                            |
|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2005 Fee will be \$550.00</b> | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees | UN00000291103<br>04/07/05-80015-007 150.00 |
|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|

| 10. OFFICERS AND DIRECTORS                         |                                                                    |
|----------------------------------------------------|--------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | P<br>VALDEZ, GEORGE<br>4932 MISTY PINES TRAIL<br>LAKE WORTH, FL    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | ST<br>VALDEZ, VIRGINIA<br>4932 MISTY PINES TRAIL<br>LAKE WORTH, FL |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | V<br>VALDEZ, CHRISTOPHER<br>825 WRIGHT DRIVE<br>LAKE WORTH, FL     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>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 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: Virginia Valdez Sec-Treas Virginia Valdez 4/5/05 561-7324/11  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #