


2005 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # 382248
 1. Entity Name
AUSTIN & SON AUTO ELECTRIC, INC.



Principal Place of Business Mailing Address
3909 FLORIDA AVE **3909 FLORIDA AVE**
TAMPA, FL 33603 US **TAMPA, FL 33603 US**

DO NOT WRITE IN THIS SPACE



02012005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
59-1351600 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
HASPEL, WILLIAM
4744 SCHOOL RD
LAND O LAKES, FL 34639

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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 _____ DATE _____
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, 2005 Fee will be \$350.00

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	P HENDERSON, MICHAEL 2205 PRINCESS WAY BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HASPEL, WILLIAM 4744 SCHOOL RD LAND O LAKES, FL 34639
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HASPEL, WILLIAM 4744 SCHOOL RD LAND O LAKES, FL 34639
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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: William Haspel 2/3/05 713-229-1474
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #