2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 558553

FILED Jan 07, 2004 Secretary of State

Entity Name: MANFREDS AUTOMOTIVE SPECIALTIES, INC.

Current Principal Place of Business: New Principal Place of Business: 4585 PROGRESS AVE UNIT #7 NAPLES, FL 34104 **New Mailing Address: Current Mailing Address:** 4585 PROGRESS AVE UNIT #7 NAPLES, FL 34104 US FEI Number: 59-1787886 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KRUKOW, MANFRED 751 104 AVE N. NAPLES, FL 34108 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition KRUKOW, MANFRED, KRUKOW, MANFRED, Name: Name: 751 104 AVE 751 104 AVE Address: Address: City-St-Zip: NAPLES, FL City-St-Zip: NAPLES, FL 34108 VST Title: VST Title: () Delete (X) Change () Addition KRUKOW, CATHERINE A, Name: Name: KRUKOW, CATHERINE A, 751 104 AVE 751 104 AVE Address: Address: NAPLES, FL NAPLES, FL 34108 City-St-Zip: City-St-Zip: Title: () Delete VD. Title: () Change () Addition KRUKOW, ERIC J Name: Name: 2617 LONGBOAT DRIVE Address: Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: Title: () Delete Title: (X) Change () Addition KRUKOW, CATHERINE A., KRUKOW, CATHERINE A., Name: Name: Address: 751 104 AVE, N. Address: 751 104 AVE, N. City-St-Zip: NAPLES, FL City-St-Zip: NAPLES, FL 34108 Title: VD Title: (X) Change () Addition () Delete KRUKOW, ALYSSA KRUKOW, ALYSSA Name: Name: 751 104 AVE N Address: 1933 COURTYARD WAY #202 Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CATHERINE KRUKOW **VST** 01/07/2004