

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95836

**FILED
Feb 04, 2005
Secretary of State**

Entity Name: PYRAMID AUTO SALES CORP.

Current Principal Place of Business:

C/O HERIBERTO ALFONSO
3175 N.W. 27TH AVE.
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

C/O HERIBERTO ALFONSO
3175 N.W. 27TH AVE.
MIAMI, FL 33142

New Mailing Address:

FEI Number: 59-2230924 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ALFONSO, HERIBERTO
3175 N.W. 27TH AVE.
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: ALFONSO, HERIBERTO,
Address: 3175 N.W. 27TH AVE.
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: ALFONSO, HERIBERTO J, R.
Address: 3175 N.W. 27TH AVE.
City-St-Zip: MIAMI, FL

Title: TD () Delete
Name: ALFONSO, BARBARA
Address: 15701 SW 209 AVE
City-St-Zip: MIAMI, FL 331875628

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: HERIBERTO ALFONSO

PD

02/04/2005

Electronic Signature of Signing Officer or Director

_____ Date