## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 16, 2007 08:00 AM DOCUMENT # G58456 Secretary of State AUTO TRONICS AUTO SERVICE INC. Principal Place of Business Mailing Address 55 SW 10TH ST 55 SW 10TH ST DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441 US No Chg-P CR2E034 (11/05) 02142007 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2323476 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MARSHALL, JEFFREY S. DO NOT WRITE 55 SW 10TH ST DEERFIELD BEACH, FL 33441 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algorature required when reinstating) U00000638521 02/27/07-80034-023 158.75 9. Election Campaign Financing \$5.00 May Be FILE NOWIT FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE MARSHALL, JEFFREY S NAME 55 SW 10TH ST STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH, FL MARSHALL, JEFFREY S. MAME STREET ADDRESS 55 SW 10TH ST CITY-ST-ZIP DEERFIELD BEACH, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of the corporation or the rec changed, or on an attachme

SIGNATURE:

TITLE NAME STREET ADDRESS CiTY-ST-ZIP TITLE NAME STREET ADDRESS