

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G66863

Entity Name: MACHADO CAR CARE INC.

FILED
Apr 25, 2006
Secretary of State

Current Principal Place of Business:

2801 NW 42ND AVE
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

2801 NW 42ND AVE
MIAMI, FL 33142 US

New Mailing Address:

FEI Number: 59-2363694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENEDETTI, ALVARO
1469 UITE CT
FORT LAUDERDALE, FL 33327 US

Name and Address of New Registered Agent:

BENEDETTI, ALVARO
1469 KITE CT
WESTON, FL 33327 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: ALVARO BENEDETTI

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BENEDETTI, ALVARO
Address: 1469 KITE CT
City-St-Zip: WESTON, FL 33327

Title: S () Delete
Name: DAVILLA, PATRICIA
Address: 1469 KITE CT
City-St-Zip: WESTON, FL 33327

Title: V () Delete
Name: SUN, CLAUDIA
Address: 1009 KIENGLAND LANE
City-St-Zip: FT. LEE, NJ 07024

Title: T () Delete
Name: SOLANO, LUZ CARIME
Address: 791 MEDINA AVE.
City-St-Zip: WESTON, FL 33327

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:

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 Chapter 119, 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: ALVARO BENEDETTI

PRES

04/25/2006

Electronic Signature of Signing Officer or Director

Date