

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G87586

FILED
Jan 17, 2004
Secretary of State

Entity Name: OKEECHOBEE AUTO SALES, INC.

Current Principal Place of Business:

% ROBERT L. MILLARES
125 E. OKEECHOBEE RD.
HIALEAH, FL 330105245

New Principal Place of Business:

115 E. OKEECHOBEE RD.
HIALEAH, FL 33010

Current Mailing Address:

% ROBERT L. MILLARES
8440 SW 4TH ST
MIAMI, FL 33144

New Mailing Address:

8440 SW 4TH ST
MIAMI, FL 33144

FEI Number: 59-2421931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLARES, ROBERT L.
125 E. OKEECHOBEE RD.
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

MILLARES, ROBERT L
8440 SW 4TH ST
MIAMI, FL 33144

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: ROBERT L MILLARES

01/17/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MILLARES, ROBERT L.,
Address: 1681 W. 72ND ST.
City-St-Zip: HIALEAH, FL

Title: SVD () Delete
Name: MILLARES, ROBERT P.,
Address: 1681 W. 72ND ST.
City-St-Zip: HIALEAH, FL

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: MILLARES, ROBERT L
Address: 8440 SW 4TH ST
City-St-Zip: MIAMI, FL 33144

Title: VD (X) Change () Addition
Name: CHAO, ALEIDA
Address: 8440 SW 4TH ST
City-St-Zip: MIAMI, FL 33144

Title: D () Change (X) Addition
Name: MILLARES, ROBERT P
Address: 1730 W 62ND ST
City-St-Zip: HIALEAH, FL 33012

Title: SD () Change (X) Addition
Name: MILLARES, FERMINA
Address: 8440 SW 4TH ST
City-St-Zip: MIAMI, FL 33144

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: ROBERT L MILLARES

PTD

01/17/2004

Electronic Signature of Signing Officer or Director

Date