


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2005 08:00 AM
Secretary of State

1. Entity Name
H95885
IMPORT AUTO SERVICE, INC.



Principal Place of Business Mailing Address
342 W. NEW YORK AVE **342 W. NEW YORK AVE.**
P.O. BOX 635 **P.O. BOX 635**
DELAND, FL 32720 US **DEALND, FL 32720 US**

DO NOT WRITE IN THIS SPACE



01032005

4. FEI Number Applied For
59-2691790 Not Applicable

5. Certificate of Status Desired **\$8.75**

6. Name and Address of Current Registered Agent
MACCOY, BARRY G.
342 W. NEW YORK AVE
DELAND, FL 32720

DO NOT WRITE 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MACCOY, BARRY 342 W. NEW YORK AVE DELAND, FL
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01/06/05-80010-025 150.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 1/6/05 386 7963497
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #