

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K74299

FILED  
Mar 28, 2005  
Secretary of State

Entity Name: PERFORMANCE AUTO, INC.

**Current Principal Place of Business:**

338 NW 171ST STREET  
NORTH MIAMI, FL 33169 US

**New Principal Place of Business:**

**Current Mailing Address:**

338 NW 171ST STREET  
NORTH MIAMI, FL 33169 US

**New Mailing Address:**

FEI Number: 65-0025906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HIGGINS, LESLIE  
3521 SW 175 AVE  
MIRAMAR, FL 33029 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: PT ( ) Delete  
Name: HIGGINS, LESLIE,  
Address: 3521 SW 175 AVE  
City-St-Zip: MIRAMAR, FL 33029 US

Title: VS ( ) Delete  
Name: HIGGINS, LONA,  
Address: 3521 SW 175 AVE  
City-St-Zip: MIRAMAR, FL 33029

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: LESLIE HIGGINS

PT

03/28/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date