2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 31, 2005
Secretary of State

DOCUMENT# L03000009829

Entity Name: H & A AUTO EXPORT, LLC

Current Principal Place of Business:

3804 NORTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 700880
SAINT CLOUD, FL 34770 US

New Mailing Address:

FEI Number: 04-3746870 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BONILLA, AIDA
3804 NORTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: BONILLA, AIDA
Address: 2776 N O.B.T.
City-St-Zip: KISSIMMEE, FL 34744 US

Title: MGRM ( ) Delete
Name: BONILLA, HECTOR
Address: 2776 N O.B.T.
City-St-Zip: KISSIMMEE, FL 34744 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BONILLA, AIDA
Address: 3804 NORTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32804 US

Title: MGRM (X) Change ( ) Addition
Name: BONILLA, HECTOR
Address: 3804 NORTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32804 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: AIDA BONILLA MANA 05/31/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date