

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M14117

FILED
Feb 25, 2006
Secretary of State

Entity Name: CHARLIE'S AUTO REPAIR, INC.

Current Principal Place of Business:

18506 S.W. 104 AVE.
P O BOX 972837
MIAMI, FL 33197

New Principal Place of Business:

18506 S.W. 104 AVE.
P.O. BOX 972837
MIAMI, FL 33157

Current Mailing Address:

18506 S.W. 104 AVE.
P O BOX 972837
MIAMI, FL 33197

New Mailing Address:

18506 SW 104 AV /
P O BOX 972837
MIAMI, FL 33197

FEI Number: 59-2545018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLIE, LAGUNA ESQUIRE
9190 SUNSET DRIVE
MIAMI, FL 33173 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: DVT () Delete
Name: RIZZETTO, GENY,
Address: P.O BOX 972837
City-St-Zip: MIAMI, FL 33197

Title: PDS () Delete
Name: RIZZETTO, MARIO,
Address: P.O. BOX 972837
City-St-Zip: MIAMI, FL 33197

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 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: MARIO A RIZZETTO

PDS

02/25/2006

Electronic Signature of Signing Officer or Director

Date