

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000007143

FILED  
May 16, 2006  
Secretary of State

Entity Name: MCKNIGHT AUTO REPAIRS CORPORATION

**Current Principal Place of Business:**

685 NW 121 STREET  
N. MIAMI, FL 33168

**New Principal Place of Business:**

**Current Mailing Address:**

685 NW 121 STREET  
N. MIAMI, FL 33168

**New Mailing Address:**

FEI Number: 65-1030364

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCKNIGHT, CASTUS Y  
15410 NW 30 AVE  
OPA LOCKA, FL 33054 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCKNIGHT, CASTUS  
Address: 685 NW 121ST  
City-St-Zip: N MIAMI, FL 33168

Title: VP ( ) Delete  
Name: MCKNIGHT, CARLA  
Address: 685 NW 131ST  
City-St-Zip: N MIAMI, FL 33167

**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: CASTUS MCKNIGHT

PRES

05/16/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date