

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000014841

Entity Name: IDS AUTO, INC.

FILED  
Apr 17, 2008  
Secretary of State

## Current Principal Place of Business:

301 174TH STREET  
APT. 718  
NORTH MIAMI BEACH, FL 33160

## Current Mailing Address:

301 174TH STREET  
APT. 718  
NORTH MIAMI BEACH, FL 33160

## New Principal Place of Business:

301 174TH STREET  
APT. 718  
SUNNY ISLES, FL 33160

## New Mailing Address:

301 174TH STREET  
APT. 718  
SUNNY ISLES, FL 33160

FEI Number: 65-0981625

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANDLER, INNA  
301 174TH STREET  
APT. 718  
NORTH MIAMI BEACH, FL 33160 US

## Name and Address of New Registered Agent:

SANDLER, INNA  
301 174TH STREET  
APT. 718  
SUNNY ISLES, FL 33160 US

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: INNA SANDLER

04/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SANDLER, INNA  
Address: 301 174TH STREET, APT. 718  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SANDLER, INNA  
Address: 301 174TH STREET, APT. 718  
City-St-Zip: SUNNY ISLES, FL 33160

Title: VP ( ) Change (X) Addition  
Name: SANDLER, DMITRY  
Address: 2830 FAIRWAYS DR  
City-St-Zip: HOMESTEAD, FL 33035

I hereby certify that the information supplied with this filing does not qualify 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: INNA SANDLER

PD

04/17/2008

Electronic Signature of Signing Officer or Director

Date