# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2006**
**Secretary of State**

DOCUMENT# P00000027199

**Entity Name:** LOU'S AUTO REPAIR, INCORPORATED

**Current Principal Place of Business:**

411 EAST NEW HAVEN AVE.
MELBOURNE, FL 32901 US

**New Principal Place of Business:**

411 EAST NEW HAVEN AVENUE
MELBOURNE, FL 329014507 US

**Current Mailing Address:**

411 EAST NEW HAVEN AVE.
MELBOURNE, FL 32901 US

**New Mailing Address:**

411 EAST NEW HAVEN AVENUE
MELBOURNE, FL 329014507 US

**FEI Number: 59-3641006** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CABOT, LOUIS
406 CORNELL AVE
MELBOURNE, FL 32901 US

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

BRUNN, FRANK
407 EAST NEW HAVEN AVENUE
MELBOURNE, FL 329014507 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: FRANK BRUNN 04/29/2006
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: CABOT, LOUIS
Address: 411 E. NEW HAVEN AVE.
City-St-Zip: MELBOURNE, FL 32901

Title: V ( ) Delete
Name: CABOT, DENISE E
Address: 411 E. NEW HAVEN AVE.
City-St-Zip: MELBOURNE, FL 32901

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

Title: P (X) Change ( ) Addition
Name: CABOT, LOUIS
Address: 411 EAST NEW HAVEN AVENUE
City-St-Zip: MELBOURNE, FL 329014507 US

Title: V (X) Change ( ) Addition
Name: CABOT, DENISE E
Address: 411 EAST NEW HAVEN AVENUE
City-St-Zip: MELBOURNE, FL 329014507 US

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: FRANK BRUNN RA 04/29/2006
Electronic Signature of Signing Officer or Director Date