


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2005 8:00 am
Secretary of State

05-12-2005 90246 038 ***150.00

DOCUMENT # P00000037771 1. Entity Name P & J AUTO SALES CORP.					
Principal Place of Business 7124 NW 2 CT MIAMI, FL 33150		Mailing Address 11030 W GOLF DRIVE MIAMI, FL 33167 13310 N.E. 4th Ave <i>miami FL-33161</i>			
2. Principal Place of Business 7124 NW 2 CT Suite, Apt. #, etc.		3. Mailing Address 13310 N.E. 4th Ave Suite, Apt. #, etc.			
City & State MIAMI FL.		City & State N. MIAMI FL.		4. FEI Number 65-1062035	
Zip 33150		Country FLADE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MERIZIER, PAUL 11030 W GOLF DRIVE MIAMI, FL 33167				7. Name and Address of New Registered Agent Name Paul MERIZIER Street Address (P.O. Box Number is Not Acceptable) 13310 N.E. 4th Ave City N. MIAMI FL Zip Code 33161	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Paul Merizier</i> Paul MERIZIER 05/08/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
NOT Received Original Application FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO MERIZIER, PAUL 11030 W GOLF DRIVE MIAMI, FL 33167		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President owner 13310 N.E. 4th Ave N. MIAMI FL- 33161	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MERIZIER Paul 13310 N.E. 4th Ave MIAMI FL- 33161		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Paul Merizier</i> Paul Merizier <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			05/08/05 786-286-5307 <small>Date Daytime Phone #</small>		