

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000053786

FILED
Mar 22, 2005
Secretary of State

Entity Name: ALONSO AUTO SALES CORP.

Current Principal Place of Business:

2510 PALM AVE
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

2510 PALM AVE
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 65-0276132 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALONSO, SAMUEL
864 WEST 69 ST.
HIALEAH, FL 33014 US

Name and Address of New Registered Agent:

ALONSO, SAMUEL
2510 PALM AVE
HIALEAH, FL 33010 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: SAMUEL ALONSO

03/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ALONSO, SAMUEL
Address: 864 W 69 ST
City-St-Zip: HIALEAH, FL 33014

Title: DST () Delete
Name: ALONSO, IVIS J
Address: 864 W 69 ST
City-St-Zip: HIALEAH, FL 33014

Title: DV (X) Delete
Name: ALONSO, MARIA
Address: 864 W 69 ST
City-St-Zip: HIALEAH, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ALONSO, SAMUEL
Address: 2510 PALM AVE
City-St-Zip: HIALEAH, FL 33010

Title: DST (X) Change () Addition
Name: ALONSO, IVIS J
Address: 2510 PALM AVE
City-St-Zip: HIALEAH, FL 33010

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 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 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: SAMUEL ALONSO

DP

03/22/2005

Electronic Signature of Signing Officer or Director

Date