

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000072926

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: EXPERT'S AUTO TECH, INC

**Current Principal Place of Business:**

1500 PARK COMMERCE CT  
SAINT CLOUD, FL 34769

**New Principal Place of Business:**

**Current Mailing Address:**

1500 PARK COMMERCLE CT  
ST. CLOUD, FL 34769

**New Mailing Address:**

FEI Number: 59-3657679

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

RIVERA, ANGEL L  
1500 PARK COMMERCE CT  
ST. CLOUD, FL 34769 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RIVERA, ANGEL L  
Address: 1500 PARK COMERCE CIR  
City-St-Zip: ST. CLOUD, FL 34769

Title: ST ( ) Delete  
Name: RIVERA, WANDA  
Address: 770 ORANGE AVENUE  
City-St-Zip: SAINT CLOUD, FL 34769

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: RIVERA, WANDA  
Address: 3925 HIXON AVE.  
City-St-Zip: SAINT CLOUD, FL 34772

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: ANGEL L. RIVERA

PD

01/04/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date