2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 24, 2006 8:00 am Secretary of State 07-07-2006 90003 050 ***150.00 7/

DOCUN 1. Entity Name ASIA AUT			07-07-2006 90003 050						**150.00		
Principal Place of Business Mailing Address 7560 NW 77 TERR 8905 LAKE PARK CIRCLE S MEDLEY, FL 33166 DAVIE, FL 33328				TH .			U V H		··· FIFE: 2 0 00		
2. Principal Pla	ace of Business	3. Maring Addres Tu	itle	Oak	G						
Suite, Apt.	, etc.	Suite, Apt. #. etc.			<u> </u>	0703200	6 Ch	g-P	CR2E0	34 (11/05)	
Ciry & State		Dity & State &			4. FEI Numbe 65-106						oplied For of Applicable
Zip	Country	33328	Countr	Ŋ			ate of Status	Desired		\$8.75 Add	ditional
	6. Name and Address of Current R	egistered Agent	`	N-ma		7. Name a	nd Addres	of New R	egistered /	Agent .	
	R, JUAN CARLOS E PARK CIRCLE SOUTH		, ,	Street Add	dress (I	P.O. Box Nur	nber is Not	Acceptable) FL	Z _i p Cod	le
8. The above	named entity submits this statement for	the purpose of changing its	registere	d office or a	egister	ed agent, or	both, in the	State of Flo		familiar with,	and accept
the obligation	ions of registered agent.				_	when reinstating)			DATE		
Du	LE NOWIII FEE IS \$150.00 ue by September 6, 2006	Election Campai Trust Fund Cont	tribution.	cing 🔲	\$5. Add	00 May Be ed to Fees	corpo	ration did i	not receive	.193(2)(b), e the prior (notice.
10.	OFFICERS AND D	DIRECTORS Delete	11.		Df	ADDITION	IS/CHANG	ES TO OFFI		OIRECTOR:	S (N 11
NAME STREET ADDRESS CITY-ST-ZIP	BADDOUR, JUAN CARLOS 8905 LAKE PARK CIRCLE SOUTI DAVIE, FL 33328		NAME STREE		Bog	AGON.	が続	sn(a 200 34		328	- Maringo
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Oelete			_					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delate	TITLE NAME STREE				- 1			☐ Change	Addition
TITLE HAME STREET ADDRESS CITY-ST-ZIP		☐ Ociete								Change	Addition
TITLE HAME STREET ADDRESS CITY-ST-ZIP		☐ Delete								Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Deleta		1						□ Change	Addition
12. I hereby of indicated of the corchanged.	certify that the information supplied with to this report or supplemental given it procession or the receiver or MUSH emboor, or on an attachment with an adoless.	this liting does not qualify for true and accurate and that in were do execute this report with all blooking empowered.	my signat 1 as requir 1,	uro shall ha red by Char	ontained ive the oter 601	d in Chapter same legal er r, Florida Sla	119, Florida flect as if m futes; and th	Statutes. I ade under d nat my name	path; that I is a spears in	tify that the it am an office in Block 10 c	nformation or director r Block 11 if