


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT


**FILED**  
**Apr 27, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000111731</b>	
1. Entity Name CAR CORP. ASSOCIATES	

Principal Place of Business 1333 TYLER STREET HOLLYWOOD, FL 33020	Mailing Address 1333 TYLER STREET HOLLYWOOD, FL 33020
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent	
I&A CORPORATE SERVICES, INC. 80 S.W. 8TH STREET 1720 MIAMI, FL 33130	

	
03112005	No Chg-P
CR2E034 (10/03)	
4. FEI Number 65-1140977	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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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	(NOTE: Registered Agent signature required when reinstating)	DATE
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<p><b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b></p>	<p>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/></p> <p><b>\$5.00 May Be Added to Fees</b></p>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD COLETTA, AL 1333 TYLER STREET HOLLYWOOD, FL 33020
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U00000335414  
04/27/05-80084-022 150.00

DO NOT WRITE IN THIS SPACE

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: 	14-25-05	305 632 9873
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #