


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000002274	
1. Entity Name CORNERSTONE MOTORS, INC.	

Principal Place of Business 2840 FOREST HILL BLVD WEST PALM BEACH, FL 33435	Mailing Address 2840 FOREST HILL BLVD WEST PALM BEACH, FL 33435
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DO NOT WRITE IN THIS SPACE

U00000446556
03/03/06-80017-009 150.00



01242006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1071687	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MERCADANTE, PATRICK 2840 FOREST HILL BLVD WEST PALM BEACH, FL 33408

**DO NOT WRITE
IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MERCADANTE, PATRICK 2840 FOREST HILL BLVD WEST PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MERCADANTE, ANNMARIE 2840 FOREST HILL BLVD WEST PALM BEACH, FL 33408
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date 2-21-06	Daytime Phone # 561-434-9668
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