

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 19, 2006 8:00 am**  
**Secretary of State**

06-19-2006 90002 015 \*\*\*558.75

<b>DOCUMENT # P01000003603</b>					
<b>1. Entity Name</b> <b>JULIO'S AUTO SALES, INC.</b>					
<b>Principal Place of Business</b> <b>116 SNIVELY AVE</b> <b>WINTER HAVEN, FL 33880</b>			<b>Mailing Address</b> <b>P.O. 1671</b> <b>EAGLE LAKE, FL 33839</b>		
<b>2. Principal Place of Business</b> <b>3385 Hwy 17 N.</b>		<b>3. Mailing Address</b>  			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b> <b>Bartow FL</b>		<b>City &amp; State</b>  		<b>4. FEI Number</b> <b>59-3690650</b>	
<b>Zip</b> <b>33830</b>		<b>Country</b> <b>Polk</b>		<b>Applied For</b> Not Applicable	
<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				<b>06132006 Chg-P CR2E034 (11/05)</b>	
<b>6. Name and Address of Current Registered Agent</b> <b>RUSTON, EVA ANNEDA</b> <b>116 SNIVELY AVENUE</b> <b>WINTER HAVEN, FL 33880</b>			<b>7. Name and Address of New Registered Agent</b> <b>Name</b> <u>EVA ANNEDA RUSTON</u> <b>Street Address (P.O. Box Number is Not Acceptable)</b> <u>3391 Hwy 17 N</u> <b>City</b> <u>Bartow</u> <b>FL</b> <b>Zip Code</b> <u>33830</u>		
<b>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.</b> <b>SIGNATURE</b> <u>Eva A. Ruston</u> <b>DATE</b> <u>6-1-06</u> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))</small>					
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 6, 2006</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>PD</b> <b>RUSTON, EVA ANNEDA</b> <b>116 SNIVELY AVENUE</b> <b>WINTER HAVEN, FL 33880</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>S</b> <b>WANDA BRYAN</b> <b>1221st Street</b> <b>WINTER HAVEN FL 33880</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	 	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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<b>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.</b>					
<b>SIGNATURE:</b> <u>Eva A. Ruston</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<b>863-533-</b> <u>6-1-06</u> <u>6616</u> <small>Date Daytime Phone #</small>		