2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004
Secretary of State

DOCUMENT# P01000018302

Entity Name: AUTO MOTION & DRIVE, INC.

Current Principal Place of Business:

815 N RIDGEWOOD
DAYTINA BEACH, FL

New Principal Place of Business:

815 N RIDGEWOOD
DAYTINA BEACH, FL 32114 US

Current Mailing Address:

5898 TRAILWOOD DR
DAYTONA BEACH, FL 32127

New Mailing Address:

5898 TRAILWOOD DR
DAYTONA BEACH, FL 32127 US

FEI Number: 22-3783042 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OKHOVATIAN, SHIRLEY A
926 SOUTH RIDGEWOOD AVENUE
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

FIROUZABADI, FARZAD
5898 TRAILWOOD DRIVE
PORT ORANGE, FL 32127 US

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: F.FIROUZABADI 01/20/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: FARZAD, FIROUZABADI
Address: 5898 TRAILWOOD DR
City-St-Zip: PORT ORANGE, FL 32127

Title: VP ( ) Delete
Name: ZOMORODIAN, HAMID
Address: 5898 TRAILWOOD DR
City-St-Zip: PORT ORANGE, FL 32127

Title: S ( ) Delete
Name: MUSCAT, JOSEPH
Address: 90 N GREENWAY DR
City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition
Name: FIROUZABADI, FARZAD
Address: 5898 TRAILWOOD DR
City-St-Zip: PORT ORANGE, FL 32127 US

Title: VP (X) Change ( ) Addition
Name: FIROUZABADI, FARZAD
Address: 5898 TRAILWOOD DR
City-St-Zip: PORT ORANGE, FL 32127 US

Title: S (X) Change ( ) Addition
Name: FIROUZABADI, BEVERLY K
Address: 5898 TRAILWOOD DR
City-St-Zip: PORT ORANGE, FL 32127

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: FFIROUZABADI PST 01/20/2004
Electronic Signature of Signing Officer or Director Date