

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000070233

FILED
Feb 25, 2005
Secretary of State

Entity Name: WYNNS INTERNATIONAL, INC.

Current Principal Place of Business:

5263 GOLDEN GATE PARKWAY
UNIT B
NAPLES, FL 34116 US

New Principal Place of Business:

New Mailing Address:

160 12TH AVENUE NE
GOLDEN GATE ESTATES
NAPLES, FL 341203354 US

Current Mailing Address:

5263 GOLDEN GATE PARKWAY
UNIT B
NAPLES, FL 34116 US

FEI Number: 90-0033229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, ESTELA W
20600 NE 15TH AVE
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

PEREZ, COSME E
160 12TH AVENUE NE
NAPLES, FL 341203354 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: COSME E PEREZ

02/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PEREZ, ESTELA W
Address: 5263 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34116

Title: DS () Delete
Name: PEREZ, COSME
Address: 5263 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34116

Title: DT (X) Delete
Name: PEREZ, COSME E
Address: 5263 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PEREZ, COSME E
Address: 160 12TH AVENUE NE
City-St-Zip: NAPLES, FL 34120

Title: DS (X) Change () Addition
Name: PEREZ, ESTELA W
Address: 160 12TH AVENUE NE
City-St-Zip: NAPLES, FL 34120

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: COSME E PEREZ

DP

02/25/2005

Electronic Signature of Signing Officer or Director

Date