

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000023619

Entity Name: DELUXE AUTO TOPS, INC.

FILED
Jan 13, 2008
Secretary of State

Current Principal Place of Business:

3200 SHAWNEE AVE STE 5
WEST PALM BEACH, FL 33409

New Principal Place of Business:

3292 SHAWNEE AVE STE 8
WEST PALM BEACH, FL 33409

Current Mailing Address:

3200 SHAWNEE AVE STE 5
WEST PALM BEACH, FL 33409

New Mailing Address:

3292 SHAWNEE AVE STE 8
WEST PALM BEACH, FL 33409

FEI Number: 03-0407798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

QUIROZ, SAL
3200 SHAWNEE AVE STE 5
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

QUIROZ, SAL
3292 SHAWNEE AVE STE 8
WEST PALM BEACH, FL 33409 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: SALVADOR QUIROZ

01/13/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: QUIROZ, SAL
Address: 3200 SHAWNEE AVE STE 5
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: QUIROZ, SAL
Address: 3292 SHAWNEE AVE STE 8
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SALVADOR QUIROZ

PRES

01/13/2008

Electronic Signature of Signing Officer or Director

Date