


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90096 036 ***150.00

DOCUMENT # P02000101530 1. Entity Name A-ONE STOP AUTO CORP.																													
Principal Place of Business 9738 SW 168TH TERR. MIAMI, FL 33157			Mailing Address 9738 SW 168TH TERR. MIAMI, FL 33157																										
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P.O. Box 560071 Suite, Apt. #, etc.																											
City & State City: MIAMI, FL		City & State MIAMI, FL		4. FEI Number 56-2293823																									
Zip 33256-0071	Country	Zip 33256-0071	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent OLIVEIRA, JACKELINE 9738 SW 168TH TERR. MIAMI, FL 33157				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																									
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees																										
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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: Jacqueline Oliveira 1/23/06 305-235-7797
 (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date Daytime Phone #