


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # P03000011689	
1. Entity Name BETTER LEATHER & AUTO TRIM CO.	

Principal Place of Business 16011 N NEBRASKA AVE. STE. 108 LUTZ, FL 33549	Mailing Address 16011 N NEBRASKA AVE. STE. 108 LUTZ, FL 33549
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DO NOT WRITE IN THIS SPACE



04242007 No Chg-P CR2E034 (11/05)

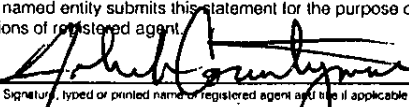
4. FEI Number 11-3674982	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

COUNTRYMAN, JOHN A  
16011 N NEBRASKA AVE, STE 106  
LUTZ, FL 33549-6158

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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  John A. Countryman, CPA April 25, 2007

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD MACALUSO, THOMAS P JR 16011 N NEBRASKA AVE, STE 106 LUTZ, FL 33549
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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05/14/07-80057-010 150.00

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:  April 25, 2007 813 909-8500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #