## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000045759

City-St-Zip:

Entity Name: AUTOMEDIC ADVANTAGE, INC.

FILED Apr 27, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 200 VALENCIA ROAD 206 PERTH COURT DEBARY, FL 32713 WINTER SPRINGS, FL 32708 US **Current Mailing Address:** New Mailing Address: P O BOX 530632 200 VALENCIA ROAD DEBARY, FL 32713 US DEBARY, FL 32753 US FEI Number: 20-0006272 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPARKS, FRANCES P 200 VALÉNCIA ROAD DEBARY, FL 32713 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition ARMSTRONG, SUNSHINE PRES. Name: Name: 206 PERTHICT APT A Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 US City-St-Zip: Title: () Delete Title: () Change () Addition SPARKS, FRANCES P SECRETA Name: Name: 200 VALENCIA ROAD Address: Address: DEBARY, FL 32713 US

City-St-Zip:

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.

Ρ SIGNATURE: SUNSHINE ARMSTRONG 04/27/2009