2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000048925

11313 NW 65 ST.

MIAMI, FL 33178

Address:

City-St-Zip:

Entity Name: CASAVE AUTO REPAIRS, INC.

FILED Jan 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 345 NW 170 ST NORTH MIAMI BEACH, FL 33169 **Current Mailing Address: New Mailing Address:** 345 NW 170 ST NORTH MIAMI BEACH, FL 33169 FEI Number: 20-0012797 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLDER, IAN 345 NW 170 ST NORTH MIAMI BEACH, FL 33169 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: PD () Delete Title: () Change () Addition HOLDER, IAN Name: Name: 4931 SW 167 AVE. Address: Address: City-St-Zip: SOUTHWEST RANCHES, FL 33331 City-St-Zip: Title: VD () Delete Title: (X) Change () Addition DE ANGELIS, GUSTAVO H Name: ANGELIS, GUSTAVO D Name:

Address:

Citv-St-Zip:

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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: IAN HOLDER PD 01/05/2004