## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000056828

SPALMA, ANN B

POMPANO, FL 33062

2637 E ATLANTIC BLVD #179

Name:

Address:

City-St-Zip:

Entity Name: FOUR STAR AUTO SALES, INC.

FILED Apr 30, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3206 ROBBINS RD POMPANO BCH, FL 33062 **Current Mailing Address: New Mailing Address:** 3206 ROBBINS RD POMPANO BCH, FL 33062 FEI Number: 91-2193218 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: RAPPA, HUGH 3206 ROBBINS RD POMPANO BCH, FL 33062 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 RAPPA, HUGH Name: Name: 3206 ROBBINS RD Address: Address: City-St-Zip: POMPANO BCH, FL 33062 City-St-Zip: Title: DV Title: () Delete () Change () Addition Name: RAPPA, ANDREA Name: 3206 ROBBINS RD Address: Address: POMPANO BCH, FL 33062 City-St-Zip: City-St-Zip: Title: Title: DT ( ) Delete () Change () Addition SPALMA, JESSE Name: Name: 2637 E ATLANTIC BLVD #179 Address: Address: City-St-Zip: POMPANO, FL 33062 City-St-Zip: Title: DS ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ANN BERNADETTE SPALMA DS 04/30/2004