## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 14, 2005 8:00 am Secretary of State

DOCUMENT # P03000088613  1. Entity Name AUTOS CAPRICORNIO, INC								02-14-2005	5 90041 0:	21 ***150	0.00
Principal Place of Business 4311 SR 574 PLANT CITY, FL 33566				Mailing Address 4311 SR 574 PLANT CITY, FL 33566			1 18 M (1 M M M M M M M M M M M M M M M M M	11 <b>e a i a a</b> 1550 <b>a a</b> 1111 <b>a a</b> 1111 <b>a</b>	IAGGI ARRIAN IRREN IN	111 <b>0 0</b> 1110 1 1100 111	1 <b>166</b> 1   11 <b>16</b> 1
2. Principal Place of Business				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.			01132005	Chg-P	CR2EC	34 (10/03)	
City & State				City & State		4. FEI Number Applied For 57-1183017 Not Applicable					
Zip	Country			<u> </u>		ਮੋਹ <b>y</b>	5. Certificate of Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
MOLINA, FABRICIO 4311 SR 574 PLANT CITY, FL 33566					Name Street Address (P.O. Box Number is Not Acceptable)						
						City FL Zip Co				Zip Code	e
8. The above named entity submits his 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.											and accept
SIGNATURE											
Signatus, typed or printed hanse of registered agent and table it supplicable. (NOTE: Registered Agent skg/vature required which represents). OATE											
		FEE IS \$150. 5 Fee will be		9. Election Camp		.00 May Be					
10.		OFFICE	RS AND D	L IRECTORS	11.	i i	ADDITIONS	/CHANGES TO O	FICERS AND	DIRECTORS	\$ IN 11
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NAME STORET ADDRESS		FABRICIO	-		NAA CTD	-				• • •	:
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12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 419.07(3)(i). Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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.											