2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102123

Entity Name: MCNP AUTO CARE, INC.

FILED Mar 17, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1621 N DIXIE HIGHWAY 3341 N DIXIE HIGHWAY

BAY 5 BAY D

POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33064

Current Mailing Address: New Mailing Address:

1621 N DIXIE HIGHWAY 3341 N. DIXIE HWY BAY D

BAY 5

POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33064

FEI Number: 20-0238493 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:

GILBERTSON, STEPHEN W CPA 2720 E OAKLÁND PARK BLVD SUITE 109 FORT LAUDERDALE, FL 33306 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: () Change () Addition PSTD () Delete Title:

Name: OLIVEIRA, NARA M Name: 2222 N CYPRESS BEND DRIVE #505 Address: Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip:

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 Statutés. 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: NARA M. OLIVEIRA **PRES** 03/17/2005