
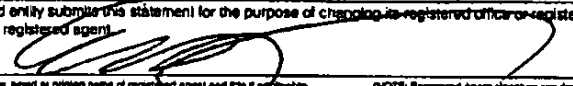
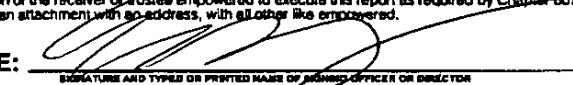


FILED
Mar 23, 2006 8:00 am
Secretary of State

01-30-2006 90050 037 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

1/2

DOCUMENT # P03000113511		
1. Entity Name AUTOMOTIVE EXCHANGE OF CENTRAL FLORIDA, INC.		
Principal Place of Business 9036 S. ORANGE AVE. ORLANDO, FL 32824	Mailing Address 9036 S. ORANGE AVE. ORLANDO, FL 32824	
DO NOT WRITE IN THIS SPACE		01162006 No Chg-P CR2E034 (11/05)
		4. FEI Number 90-0118635 Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent GARCIA, EDWIN 14416 QUAIL TRAIL COURT ORLANDO, FL 32837		DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE  <small>Signature, typed or printed name of registered agent and fee if applicable</small> (NOTE: Registered Agent signature required when releasing)		DATE 2-21-06
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARCIA, EDWIN 14416 QUAIL TRAIL CT. ORLANDO, FL 32837	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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/guardian 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.		
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF NAMED OFFICER OR DIRECTOR</small>		DATE 2-21-06 <small>Daytime Phone #</small>

66006684





ATTACHMENT

66006684

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 7, 2006

AUTOMOTIVE EXCHANGE OF CENTRAL FLORIDA, INC.
9036 S. ORANGE AVE.
ORLANDO, FL 32824

Subject: AUTOMOTIVE EXCHANGE OF CENTRAL FLORIDA, INC.

Reference Number: P03000113511

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm

ANNUAL REPORTS SECTION



ATTACHMENT

-66006684

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 2, 2006

AUTOMOTIVE EXCHANGE OF CENTRAL FLORIDA, INC.
9036 S. ORANGE AVE.
ORLANDO, FL 32824

Subject: AUTOMOTIVE EXCHANGE OF CENTRAL FLORIDA, INC.

Reference Number: P03000113511

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/rm

ANNUAL REPORTS SECTION

P.O. BOX 6327 - Tallahassee, Florida 32314