

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000007010

Entity Name: OFF LEASE AUTO. COM INC.

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

5823 LAKEWORTH RD  
GREENACRES, FL 33463

## **New Principal Place of Business:**

5835 LAKEWORTH RD  
GREENACRES, FL 33463

## **Current Mailing Address:**

5823 LAKEWORTH RD  
GREENACRES, FL 33463

## **New Mailing Address:**

5835 LAKEWORTH RD  
GREENACRES, FL 33463

FEI Number: 73-1691419

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

JOE, HONKUS  
5823 LAKEWORTH RD  
LAKE WORTH, FL 33463 US

## **Name and Address of New Registered Agent:**

JOE, HONKUS  
5835 LAKEWORTH RD  
LAKE WORTH, FL 33463 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: JOE HONKUS

02/22/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: HONKUS, JOSEPH  
Address: 147 SEDONA WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

I hereby 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 all other like empowered.

SIGNATURE: JOE HONKUS

PRES

02/22/2011

Electronic Signature of Signing Officer or Director

Date