2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010025

Entity Name: CRISPIM AUTO REPAIR CORP.

FILED Apr 20, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

4651 OAK HAVEN DR. 151 E. TAFT-VINELAND ROAD ORLANDO, FL 32824 US

ORLANDO, FL 32839 US

Current Mailing Address: New Mailing Address:

4651 OAK HAVEN DR. 2143 LAKE DEBRA DR

ORLANDO, FL 32839 US ORLANDO, FL 32835 US

FEI Number: 20-0596856 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:

RIVERA, CRISTINA

ACCOUNT BOOKKEEPING CORP
1516 E. COLONIAL DRIVE

107

ORLANDO, FL 32803 US

ACCOUNT BOOKKEEPING CORP
5950 LAKEHURST DR
SUITE 246
ORLANDO, FL 32819 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: CAROLINE LARSON 04/20/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

DP () Delete Title: DP (X) Change () Addition

 Name:
 SOUZA, JOSE M
 Name:
 SOUZA, JOSE M

 Address:
 4651 OAK HAVEN DRIVE APT 101
 Address:
 2143 LAKE DEBRA DR APT 1018

City-St-Zip: ORLANDO, FL 32839 US City-St-Zip: ORLANDO, FL 32835 US

Title: DVP () Delete Title: DVP (X) Change () Addition Name: SOUZA, EDIMAR C Name: SOUZA, EDIMAR C

 Address:
 4651 OAK HAVEN DRIVE APT 101
 Address:
 2143 LAKE DEBRA DR APT 1018

 City-St-Zip:
 ORLANDO, FL 32839 US
 City-St-Zip:
 ORLANDO, FL 32835 US

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.

SIGNATURE: EDIMAR C SOUZA DVP 04/20/2005