2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000038473

FILED Jan 11, 2007 Secretary of State

Entity Name: JAPANESE AUTO CARE, INC.				
Current Principal Place of Business:			New Principal Place of Business:	
23193 SANDLEFOOT PLAZA DRIVE BOCA RATON, FL 33428 US			23193 SANDLEFOOT PLA	ZA DRIVE
			BOCA RATON, FL 33428	US
Current Ma	iling Address	:	New Mailing Address:	
23193 SANDLEFOOT PLAZA DRIVE BOCA RATON, FL 33428 US			23193 SANDLEFOOT PLAZA DRIVE B	
			BOCA RATON, FL 33428	US
FEI Number: 2	20-0805734	FEI Number Applied For () FEI Nu	ımber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
CAPIELLO, MITCHELL 23193 SANDLEFOOT PLAZA DRIVE BOCA RATON, FL 33428 US			CAPPIELLO, MITCHELL 23193 SANDLEFOOT PLAZA DRIVE B	
			BOCA RATON, FL 33428 US	
The above r	named entity su of Florida.	bmits this statement for the purpose	of changing its registered off	ice or registered agent, or both,
SIGNATURE: MITCHELL CAPPIELLO			01/11/2007	
Electronic Signature of Registered Agent			Date	
Election Cam	paign Financing 1	Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () C CAPPIELLO, MIT 3822 NW 59TH S COCONUT CREE	TREET	Title: () C Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D () D TEICH, MARK 680 NW 111TH W CORAL SPRINGS		Title: () C Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	D () D MASON, EDWAR 8178 LA JOLLA V LAKE WORTH, FI	ISTA LANE	Title: () C Name: Address: City-St-Zip:	Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MITCHELL CAPPIELLO D 01/11/2007