2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000069345

FILED May 02, 2005 Secretary of State

Entity Name: OSMAN AUTO REPAIR, INC.							
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	ENWOOD AVENI M BEACH, FL 3						
Current Mailing Address:			New Mailir	New Mailing Address:			
5608 GREENWOOD AVENUE WEST PALM BEACH, FL 33407				323 DRAKE ELM DRIVE KISSIMMEE, FL 34743			
FEI Number:	F	FEI Number Applied For (X)	FEI Number Not Appli	cable () C	ertificate of Status Desi	red()	
Name and	Address of Cur	rent Registered Agent:	Name and	Name and Address of New Registered Agent:			
	VELYN L COLONIAL DRIVE ARDEN, FL 347		323 DRAKE	TAYLOR, EVELYN L 323 DRAKE ELM DRIVE KISSIMMIEE, FL 34743 US			
The above in the State		mits this statement for the p	urpose of changing it	s registered offic	ce or registered agen	t, or both,	
SIGNATURE: EVELYN TAYLOR				05/02/2005			
	Electronic	Signature of Registered Age	nt		Date		
		(b), F.S., the corporation did not ust Fund Contribution ().	receive the prior notice	€.			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () De SALAS, OSMAN 528 49TH STREET WEST PALM BEAC		Title: Name: Address: City-St-Zip:	() CI	nange () Addition		
Title: Name: Address: City-St-Zip:	VP () De OVALLE, MARBILIA 528 49TH STREET WEST PALM BEAC	Ą	Title: Name: Address: City-St-Zip:	() CI	nange () Addition		
Title: Name: Address: City-St-Zip:	() De	lete	Title: Name: Address: City-St-Zip:	TRES () CI TAYLOR, EVELYN 323 DRAKE ELM I KISSIMMEE, FL 3	OR		

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: EVELYN TAYLOR **TRES** 05/02/2005