

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000088006

FILED  
Jan 04, 2006  
Secretary of State

Entity Name: WIZE BUYZ AUTO SALES, INC.

**Current Principal Place of Business:**

9538 STATE ROAD 52  
HUDSON, FL 34669 US

**New Principal Place of Business:**

**Current Mailing Address:**

9538 STATE ROAD 52  
HUDSON, FL 34669 US

**New Mailing Address:**

FEI Number: 20-1212690      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

M & L ACCOUNTING OFFICE, INC.  
5327 COMMERCIAL WAY, D-120  
SPRING HILL, FL 346061420 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P, S ( ) Delete  
Name: TOTINO, LORI A  
Address: 5215 BONE LANE  
City-St-Zip: BROOKSVILLE, FL 34609 US

Title: T,D ( ) Delete  
Name: TOTINO, LORI A  
Address: 5215 BONE LANE  
City-St-Zip: BROOKSVILLE, FL 34609 US

Title: VP,D ( ) Delete  
Name: TOTINO, DANIEL  
Address: 5215 BONE LANE  
City-St-Zip: BROOKSVILLE, FL 34609 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P, S (X) Change ( ) Addition  
Name: POUST, MICHAEL M  
Address: P.O. BOX 1346  
City-St-Zip: HOMOSASSA SPG, FL 344471346 US

Title: T,D (X) Change ( ) Addition  
Name: POUST, MICHAEL M  
Address: P.O. BOX 1346  
City-St-Zip: HOMOSASSA SPG, FL 344471346 US

Title: VP (X) Change ( ) Addition  
Name: POUST, MICHAEL M  
Address: P.O. BOX 1346  
City-St-Zip: HOMOSASSA SPG, FL 344471346 US

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: MICHAEL M. POUST

PRES

01/04/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date