2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2005
Secretary of State

DOCUMENT# P04000091385

Entity Name: AUTO-MATIC RIDE, INC.

Current Principal Place of Business:

17414 U.S. HWY. 41 N.
LUTZ, FL 33549

New Principal Place of Business:

14413 N NEBRASKA AVE
TAMPA, FL 33613

Current Mailing Address:

17414 U.S. HWY. 41 N.
LUTZ, FL 33549

New Mailing Address:

14413 N NEBRASKA AVE
TAMPA, FL 33613

FEI Number: 13-4282419 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ALFONSO, SUZETTE M ESQ
309 W DR MARTIN LUTHER KING, JR BLVD
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

GAYLE, DEBRA J
18212 CYPRESS COVE LN
LUTZ, FL 33549 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: DEBRA J GAYLE 06/30/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GAYLE, SUE
Address: 18212 CYPRESS COVE LANE
City-St-Zip: LUTZ, FL 33549

Title: D ( ) Delete
Name: BERHOW, DEBRA
Address: 18212 CYPRESS COVE LANE
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: GAYLE, DEBRA
Address: 18212 CYPRESS COVE LANE
City-St-Zip: LUTZ, FL 33549

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: DEBRA GAYLE D 06/30/2005
Electronic Signature of Signing Officer or Director Date