

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000096376

Entity Name: MURRAY'S AUTO SUPPLY, INC. #7

**FILED**  
**Mar 15, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

15781 NW 7TH AVE  
NORTH MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

15781 NW 7TH AVE  
NORTH MIAMI, FL 33169

**New Mailing Address:**

FEI Number: 20-1412181

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WEINTHAL, MARC  
15781 NW 7TH AVE  
NORTH MIAMI, FL 33169 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

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: WEINTHAL, MARC  
Address: 15781 NW 7TH AVE  
City-St-Zip: NORTH MIAMI, FL 33169

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

Title: VP/D ( ) Change (X) Addition  
Name: HALLQUIST, ALBERT  
Address: 15781 NW 7TH AVENUE  
City-St-Zip: NORTH MIAMI, FL 33181

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: MARC WEINTHAL

P

03/15/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date