

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000102247

Entity Name: AUTO UNIVERSITY INC.

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

761 N.E. HARBOUR DRIVE
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 811989
BOCA RATON, FL 33481 US

New Mailing Address:

FEI Number: 27-0098735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMOKE, JOSEPH
761 N.E. HARBOUR DRIVE
BOCA RATON, FL 33431 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 () Delete
Name: INGS, TED
Address: 55 BROWN AVENUE
City-St-Zip: BUTLER, NJ 07405

Title: VP () Delete
Name: RYDER, SHAWN
Address: 1969 UPPER WATER ST, TWR 2, 22ND FLR.
City-St-Zip: HALIFAX, NS NSB3J3R7 CA

Title: S () Delete
Name: SCHMOKE, JOSEPH
Address: 761 N.E. HARBOUR DR.
City-St-Zip: BOCA RATON, FL 33431 US

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: INGS, TED
Address: 55 BROWN AVENUE
City-St-Zip: BUTLER, NJ 07405

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

Title: SD (X) Change () Addition
Name: SCHMOKE, JOSEPH
Address: 761 N.E. HARBOUR DR.
City-St-Zip: BOCA RATON, FL 33431 US

Title: CFO () Change (X) Addition
Name: KASSNER, DON
Address: 38606 KIMBRO ST
City-St-Zip: FREMONT, CA 94536 US

Title: D () Change (X) Addition
Name: CHERNYSH, STEPHEN
Address: KENMORE
City-St-Zip: GROSSE POINTE WOODS, MI 33486

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: JOSEPH SCHMOKE /S/

SD

01/10/2005

Electronic Signature of Signing Officer or Director

Date