## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000003430

Entity Name: MANATI AUTO SALES & EXPORT, INC.

FILED May 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1605 LOCKHART AVE SUITE B HAINES CITY, FL 33844

Current Mailing Address: New Mailing Address:

1605 LOCKHART AVE P.O BOX 453065 SUITE B KISSIMMEE, FL 34745 HAINES CITY, FL 33844

FEI Number: 20-2115684 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FREYTES, SONIA N
309 THOMAS DALE AVE
HAINES CITY, FL 33844 US
FREYTES, SONIA N
1118 MAIRI CT.
KISSIMMEE, FL 34744 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: SONIA N FREYTE 05/15/2008

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

P ( ) Delete Title: P (X) Change ( ) Addition COSTALES, ALEJANDRO Name: COSTALES, ALEJANDRO

 Name:
 COSTALES, ALEJANDRO
 Name:
 COSTALES, ALEJANDRO

 Address:
 309 THOMASDALE AVE
 Address:
 1118 MAIRI CT.

 City-St-Zip:
 HAINES CITY, FL 33844
 City-St-Zip:
 KISSIMMEE, FL 34744

Title: V () Delete Title: V (X) Change () Addition

 Name:
 FREYTES, SONIA N
 Name:
 FREYTES, SONIA N

 Address:
 309 THOMASDALE AVE
 Address:
 1118 MAIRI CT.

 City-St-Zip:
 HAINES CITY, FL 33844
 City-St-Zip:
 KISSIMMEE, FL 34744

I hereby certify that the information supplied with this filing does not qualify 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: ALEJANDRO COSTALES P 05/15/2008