2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000030754

Entity Name: FRIENDLY AUTO REPAIRS INC.

FILED Jan 17, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

7660 HOOPER RD. UNIT 21

WEST PALM BEACH, FL 33411

Current Mailing Address: New Mailing Address:

7660 HOOPER RD. 2264 SHOMA DR

UNIT 21 ROYAL PALM, FL 33414 WEST PALM BEACH, FL 33411

FEI Number: 20-2322118 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:

RUA, OSCAR D 1878 ABBEY RD APT 1015 RUA, OSCAR D 2264 SHOMA DR

WEST PALM BEACH, FL 33415 US ROYAL PALM, FL 33414 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: 01/17/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 RUA, OSCAR D
 Name:
 RUA, OSCAR D

 Address:
 1878 ABBEY RD APT 1015
 Address:
 2264 SHOMA DR

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:
 ROYAL PALM, FL 33414

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

 Name:
 RUA, NIDIA
 Name:
 RUA, NIDIA

 Address:
 1878 ABBEY RD APT 1015
 Address:
 2264 SHOMA DR

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:
 ROYAL PALM, FL 33414

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

 Name:
 RUA, CRISTIAN
 Name:
 RUA, CRISTIAN

 Address:
 1878 ABBEY RD APT 1015
 Address:
 2264 SHOMA DR

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:
 ROYAL PALM, FL 33414

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: OSCAR D RUA P 01/17/2007