


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90185 007 ***150.00

DOCUMENT # P05000031680	
1. Entity Name WELCOME AUTO SALES, CORP.	

Principal Place of Business 325 S. BISCAYNE BLVD. #2720 MIAMI, FL 33131	Mailing Address 325 S. BISCAYNE BLVD. #2720 MIAMI, FL 33131
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2. Principal Place of Business - No P.O. Box # 3420 NW 135 ST	3. Mailing Address P.O. Box 5402
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Opalocka Florida	City & State Hialeah Florida
Zip 33057	Zip 33014
Country USA	Country USA

6. Name and Address of Current Registered Agent QUIROGA, MARCELIANO 7925 NW 162ND STREET MIAMI LAKES, FL 33016	
7. Name and Address of New Registered Agent Name N/A Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD QUIROGA, MARCELIANO 7925 NW 162ND STREET MIAMI LAKES, FL 33016 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Marceliano Quiroga <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date 4-16-07 <small>Date</small>	(786) 4860301 <small>Daytime Phone #</small>
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ATTACHMENT

* DO NOT SEND A CHECK WITH THE POSTCARD, IT WILL DELAY PROCESSING *

OPTION 3 - **Receive a form by mail** - Allow up to 28 days total processing time.

- Detach this postcard.
- Enter address to mail report to, if different from preprinted address.
- Affix postage on reverse side and mail.

Document # **P05000031680**

40067970

WELCOME AUTO SALES, CORP.
7925 NW 162ND STREET
MIAMI LAKES FL 33016-6106

Note: This is not a change to the
address of record.



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS
P.O. Box 8700
Tallahassee, Florida 32314

First-Class Mail
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ANNUAL REPORT NOTICE

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WELCOME AUTO SALES, CORP.
7925 NW 162ND STREET
MIAMI LAKES FL 33016-6106

PLEASE change
my Address -

To 325 S. Biscayne Blvd #2720
Miami FL 33131

Thanks