

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000001770

Entity Name: LPM AUTO SALES, INC.

**FILED**  
**Feb 10, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

6337 S. ORANGE AVE.  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

11701 REGAL RIDGE LANE  
CLERMONT, FL 34711

**New Mailing Address:**

FEI Number: 20-4057369

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REMONVIL, LUMA  
11701 REGAL RIDGE LANE  
CLERMONT, FL 34711 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: PD  
Name: REMONVIL, LUMA  
Address: 11701 REGAL RIDGE LANE  
City-St-Zip: CLERMONT, FL 34711

Title: VP  
Name: REMONVIL, LUMA  
Address: 11701 REGAL RIDGE LANE  
City-St-Zip: CLERMONT, FL 34711

Title: S  
Name: REMONVIL, LUMA  
Address: 11701 REGAL RIDGE LANE  
City-St-Zip: CLERMONT, FL 34711

I hereby 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 all other like empowered.

SIGNATURE: LUMA REMONVIL

PD

02/10/2010

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

\_\_\_\_\_  
Date