

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000050561

Entity Name: N.A.M. AUTO SALES INC.

FILED
Mar 01, 2009
Secretary of State

Current Principal Place of Business:

4023 SAWYER RD UNIT 119
SARASOTA, FL 34233 US

New Principal Place of Business:

Current Mailing Address:

5121 GRAND PALMETTO WAY
NORTH PORT, FL 34291

New Mailing Address:

5121 GRAND PALMETTO WAY
NORTH PORT, FL 34291 US

FEI Number: 14-1957408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEEB, KIMBERLY A
4023 SAWYER RD UNIT 119
SARASOTA, FL 34233 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: DEEB, PAUL T
Address: 51216 ROAD PALMETTO WAY
City-St-Zip: NORTH PORT, FL 34291 US

Title: VP/D () Delete
Name: DEEB, KIMBERLY A
Address: 5121 GRAND PALMETTO WAY
City-St-Zip: NORTH PORT, FL 34291 US

Title: S/T () Delete
Name: DEEB, KIMBERLY A
Address: 5121 GRAND PALMETTO WAY
City-St-Zip: NORTH PORT, FL 34291 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DEEB, PAUL T
Address: 5121 GRAND PALMETTO WAY
City-St-Zip: NORTH PORT, FL 34291 US

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

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

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: KIMBERLY A DEEB

VP

03/01/2009

Electronic Signature of Signing Officer or Director

_____ Date