

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000077365

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** THE AUTO CARE CENTER SALES CORP.

**Current Principal Place of Business:**

2788 S MILITARY TRAIL  
WEST PALM BEACH, FL 334159223

**New Principal Place of Business:**

2788 S MILITARY TRAIL  
WEST PALM BEACH, FL 334159223 US

**Current Mailing Address:**

2788 S MILITARY TRAIL  
WEST PALM BEACH, FL 334159223

**New Mailing Address:**

2788 S MILITARY TRAIL  
WEST PALM BEACH, FL 334159223 US

**FEI Number:** 45-3145846

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASSELMAN, DENISE  
2788 S MILITARY TRAIL  
WEST PALM BEACH, FL 334159223 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

**OFFICERS AND DIRECTORS:**

Title: P/T  
Name: CASSELMAN, ROBERT  
Address: 2788 S MILITARY TRAIL  
City-St-Zip: WEST PALM BEACH, FL 334159223 US

Title: VP/S  
Name: CASSELMAN, DENISE  
Address: 2788 S MILITARY TRAIL  
City-St-Zip: WEST PALM BEACH, FL 334159223 US

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: DENISE CASSELMAN

VP

04/09/2012

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

\_\_\_\_\_ Date