

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 03, 2007 8:00 am**  
**Secretary of State**

05-03-2007 90064 021 \*\*\*150.00

**DOCUMENT # P93000009490**

1. Entity Name

CORVINO AUTOMOTIVE, INC.



Principal Place of Business

11900 WILES RD.  
CORAL SPRINGS FL 33076  
US

Mailing Address

11900 WILES RD.  
CORAL SPRINGS FL 33076  
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number **65-0384260**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORVINO, FRANK  
6067 NW 90TH AVE  
POMPANO BEACH FL 33067  
Parkland

Name

Street Address (P.O. Box Number is Not Acceptable)

City **Parkland**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2007 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME CORVINO, FRANK  
STREET ADDRESS 6067 NW 90TH AVE.  
CITY ST ZIP PARKLAND FL 33067 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition

TITLE V  
NAME CORVINO, FRANK JR.  
STREET ADDRESS 2022 ALTA MEEDOWS LANE #611  
CITY ST ZIP DELRAY BEACH FL 33444 ☐ Delete

TITLE  
NAME CORVINO, Frank Jr. ☒ Change ☐ Addition  
STREET ADDRESS 2022 ALTA MEADOWS LANE #611  
CITY ST ZIP Delray Beach, FL 33444

TITLE TSD  
NAME CORVINO, TAMARA  
STREET ADDRESS 6067 NW 90TH AVE  
CITY ST ZIP PARKLAND FL 33067 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Delete

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CITY ST ZIP ☐ Change ☐ Addition

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STREET ADDRESS  
CITY ST ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Frank Corvino* Frank Corvino, Pres. (954) 753-0700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-23-07