

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000006787

Entity Name: CONTINENTAL AUTO/TRUCK SERVICE CENTER, INC.

FILED  
Jan 17, 2012  
Secretary of State

**Current Principal Place of Business:**

985 STATE RD 206 W  
ST AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**  
985 STATE RD 206 W  
ST AUGUSTINE, FL 32086

**New Mailing Address:**

FEI Number: 59-3225233      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GIANNINI, LEOPOLDO  
985 STATE RD 206 W  
ST AUGUSTINE, FL 32086 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: PSD  
Name: GIANNINI, LEOPOLDO  
Address: 35 SANDPIPER BLVD  
City-St-Zip: ST AUGUSTINE, FL 32084

Title: VP  
Name: GIANNINI, ELVIRA  
Address: 35 SANDPIPER BLVD  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: S  
Name: GIANNINI, STEVEN L  
Address: 36 FOLCROFT LN  
City-St-Zip: PALM COAST, FL 32137

Title: T  
Name: GIANNINI, LEO D  
Address: 18 MAGNOLIA DUNES CIRCLE  
City-St-Zip: SAINT AUGUSTINE, FL 32080

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: LEO D GIANNINI

T

01/17/2012

Electronic Signature of Signing Officer or Director

Date