

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
May 09, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000032262 1. Entity Name ENRIQUEZ AUTO SALES, INC.			
Principal Place of Business 5216 N.W. 35TH AVENUE MIAMI, FL 33142		Mailing Address 6872 SW 159 CT MIAMI, FL 33193	
DO NOT WRITE IN THIS SPACE			
5. Name and Address of Current Registered Agent ENRIQUEZ, ROLANDO 6872 SW 159 CT MIAMI, FL 33193		DO NOT WRITE IN THIS SPACE	
6. 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 _____ DATE <u>05/30/07</u> <u>00000763356</u> Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature is required when reappointing)			
FILE NOW! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees In accordance with s. 607.163(2)(b), F.S., the corporation did not receive the prior notice	
10. OFFICERS AND DIRECTORS			
TITLE	D	ENRIQUEZ, ROLANDO	
NAME		6872 SW 159 CT	
STREET ADDRESS		MIAMI, FL 33193	
CITY-ST-ZIP			
TITLE	D	ENRIQUEZ, JESUS	
NAME		12905 S.W. 42ND TERRACE	
STREET ADDRESS		MIAMI, FL 33175	
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u>5-4-07</u> Date Daytime Phone #	