

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000076571

FILED
Jan 24, 2008
Secretary of State

Entity Name: AT YOUR SERVICE IMPORT AUTO REPAIR, INC.

Current Principal Place of Business:

1110 SOLANA AVE
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

1280 LOST CREEK CT.
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

1110 SOLANA AVE
WINTER PARK, FL 32789 US

FEI Number: 59-3365542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUEDECKE, GREGG A MR
1280 LOST CREEK CT.
ALTAMONTE SPRINGS, FL 32714 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: PD () Delete
Name: NUNEZ, SUSAN L MRS
Address: 1280 LOST CREEK CT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: VPD () Delete
Name: LUEDECKE, GREGG A MR
Address: 1280 LOST CREEK CT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GREGG LUEDECKE

MR

01/24/2008

Electronic Signature of Signing Officer or Director

Date