2005 FOR PROFIT-CORPORATION ANNUAL REPORT

FILED Jan 18, 2005 08:00 AM Secretary of State

DOCUMENT # P97000097441 1. Entity Name VIC'S AUTO TECH, INC. Principal Place of Business Mailing Address					Secretary of State
90575 OLD HICHWAY 905		90575 OLD HIGHWAY TAVERNIER, FL 33070			
·····					
DO NOT WRITE IN THIS SPACE				01072005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For	
		A CONTRACTOR OF THE PROPERTY O		65-0794639 5. Certificate of Status De	\$8.75 Additional Fee Required
	6. Name and Address of Current Re	gistered Agent		The state of the s	and the second of the second o
HOROWITZ, EDNA M 208 TIDE AVENUE TAVERNIER, FL 33070			DO NOT WRITE IN THIS SPACE		
	named entity submits this statement for tions of registered agent.	he purpose of changing its register	ed office or register	ed agent, or both, in the Sta	te of Florida. I am familiar with, and accept
SIGNATURE_		····	·		
	Signature, typed or printed name of registered agent and	title of applicable. (NOTE, Registers	ed Agent signature required	when reinstailing)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		.00 May Be ed to Fees	
10.	OFFICERS AND D	RECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEST, VICTOR L 90575 OLD HWY TAVERNIER, FL 33070			01/19	005-90055-005 1 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT	WRITE
TITLE. NAME STREET ADDRESS CITY-ST-ZIP			v week	IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		445 - 45			
TITLE NAME STREET ADDRESS CITY 55-719		7.7			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes 1 further certify that the information indicated on this report is rupe 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: .

L West

1/7/05