2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000023634

TAMPA, FL 33614

City-St-Zip:

Entity Name: ELYS MAR AUTO SALES, INC

FILED Jan 09, 2004 Secretary of State

Entity Nar	ne: ELYST	WAR AUTO SALES,	INC.					
Current Principal Place of Business:				New Principal Place of Business:				
6205 N. AF TAMPA, FI	RMENIA AV _ 33604	E.						
Current Mailing Address:				New Mailing Address:				
6205 N. AF TAMPA, FI	RMENIA AV _ 33604	E.						
FEI Number:	59-3564758	FEI Number Appli	ed For () FE	I Number Not Appli	cable ()	Certificate	of Status Desir	ed (X)
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
MARTINEZ 8311 N. GO TAMPA, FI	MEZ AVE	US						
The above in the State		ty submits this stater	nent for the purpo	se of changing it	s registered o	office or reg	jistered agent	, or both,
SIGNATUR	RE:							
Election Can		ronic Signature of Re cing Trust Fund Contrib	•			Da	ate	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P MARTINEZ, 8311 N. GO TAMPA, FL	MEZ ST.		Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	TS OLIVEROS, 4634 WEST TAMPA, FL	FORD CIRCLE		Title: Name: Address: City-St-Zip:	TS (X MARTINEZ, LU 8311 N. GOME TAMPA, FL 33	EZ ST.	Addition	
Title: Name: Address: City-St-Zip:	VP OLIVEROS, 4634 WEST TAMPA, FL	FORD CIRCLE		Title: Name: Address: City-St-Zip:	VP (X MARTINEZ, MA 8311 N. GOME TAMPA, FL 33	EZ AVE.	Addition	
Title: Name: Address:	O QUETGLAS 8311 N. GO	()Delete . SEBASTIAN MEZ ST.		Title: Name: Address:	() Change()	Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: LUIS B. MARTINEZ P 01/09/2004