2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S40343

FILED May 04, 2009 Secretary of State

Entity Na	ame: COMO A	UTO SALES & SERVICE, INC).				
Current F	Principal Place	of Business:	New Prince	New Principal Place of Business:			
1601 W N INVERNE	MAIN ST ESS, FL 34450						
Current Mailing Address:			New Maili	New Mailing Address:			
1601 W N INVERNE	MAIN ST ESS, FL 34450						
FEI Numbe	r: 59-3062630	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired	l ()	
Name an	d Address of C	current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1400 NW	RICHARD J 3RD ST. L RIVER, FL 34	.428 US					
	e named entity s te of Florida.	submits this statement for the	purpose of changing	its registered	d office or registered agent, c	or both,	
SIGNATU	JRE:						
	Electror	ic Signature of Registered Ag	ent	Date			
		3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ot receive the prior notic	e.			
OFFICER	RS AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address:	P/T () COMO, RICHAI 1400 NW 3RD		Title: Name: Address:	P/T COMO, RICH 1400 NW 3F			

() Change () Addition

City-St-Zip: CRYSTAL RIVER, FL 34428 City-St-Zip: CRYSTAL RIVER, FL 34428

VP/S () Delete Title: COMO, DAWN Name: Name: Address: 1400 NW 3RD ST. Address: CRYSTAL RIVER, FL 34428 City-St-Zip: 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: RICHARD J COMO **PRES** 05/04/2009