

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S63154

1. Entity Name
MY BABY AUTO SALES, INC.



Principal Place of Business
3661*B NW 27TH AVE
MIAMI, FL 33142

Mailing Address
3661*B NW 27TH AVE
MIAMI, FL 33142

05 MAY -2 AM 11:34



DO NOT WRITE IN THIS SPACE

04292005

No Chg-P

CR2E034 (10/03)

4. FEI Number
65-0353563

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, LIBIA
14610 SW 35 CT.
MIRAMAR, FL 33027

**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOPEZ, LIBIA 14610 S.W. 35TH STREET MIRAMAR, FL 33027
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05/17/05--01024--009 **150.00

**DO NOT WRITE
IN THIS SPACE**

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

Libia Lopez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/05

305-635-7933

Daytime Phone #