2006 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT #467060 1. Entity Name RAHAL- MILLER CHEVROLET-BUICK, INC. Principal Place of Business - Mailing Address 4204 LAYFAYETTE ST 4204 LAYFAYETTE ST P.O. 80X 700 MARIANNA, FL 32447 US P.O. BOX 700 MARIANNA, FL 32446 01272006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE

FILED Jan 31, 2006 08:00 AM Secretary of State

Ł	O NOI WRITE II	UE	4. FEI Number 59-1569518			Applied For Not Applicable	
				5. Certificate	of Status Desired		5 Additional Required
	5. Name and Address of Current Regis						
RAHAL, Q INDIAN SI MARIANN		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							
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.		.00 May Be led to Fees	02/09/06-8		158.75
10.	OFFICERS AND DIREC	CTORS		المداد ا	ė para		
THLE NAME SIRELY ADDRESS CITY-ST-ZIP	P RAHAL, QUEN INDIAN SPRINGS. MARIANNA, FL						
DILE NAME STREET ADDRESS CITY-ST-ZIP	S RAHAL, ANN INDIAN SPRINGS. — MARIANNA, FL —						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILLER, RICKY D			DO	NOT W	RITE	
TITLE NAME STREET AUDRESS CHY-ST-ZIP	AS PETTIS, PENNY 1896 FIRETOWER RD CHIPLEY, FL 32428			IN ⁻	THIS SP	ACE	
name Sireet address City-St-Zip							
title Mame Street address City-St-Zip							
12. I hereby certify that the information supplied with this filling floes, at qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trigotise empowered to execute hits 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 a other like empowered.							
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECT							