

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jun 04, 2007  
Secretary of State**

DOCUMENT# P01000089731

Entity Name: B.M.P. AUTOMOTIVE, INC.

**Current Principal Place of Business:**

6667 SAN JUAN AVENUE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

6667 SAN JUAN AVENUE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

FEI Number: 59-3746591      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BETHENCOURT, JOSE M  
6667 SAN JUAN AVENUE  
JACKSONVILLE, FL 32210      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PT      ( ) Delete  
Name: BETHENCOURT, JOSE M  
Address: 6667 SAN JUAN AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: S      ( ) Delete  
Name: BETHENCOURT, BRENDA K  
Address: 6667 SAN JUAN AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S      (X) Change ( ) Addition  
Name: PALENZUELA, ANTONIO F  
Address: 6667 SAN JUAN AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP      ( ) Change (X) Addition  
Name: VELEZ, LOUIE  
Address: 6667 SAN JUAN AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

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: JOSE BETHENCOURT

P

06/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date