


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P04000031123</b>	
1. Entity Name <b>IMPORT MOTORS, INC.</b>	

Principal Place of Business <b>245 HWY 231 PANAMA CITY, FL 32401</b>	Mailing Address <b>245 HWY 231 PANAMA CITY, FL 32401</b>
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**DO NOT WRITE IN THIS SPACE**



03052008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>90-0141523</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

**MCCANN, MICHAEL  
344 S PALTO ALTO AVE  
PANAMA CITY, FL 32401**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 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	<b>D MCCANN, MICHAEL 344 S PALTO ALTO AVE PANAMA CITY, FL 32401</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D GREGG, JEFF 1905 BROWN AVE PANAMA CITY, FL 32405</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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U00000916746  
05/13/08-80013-013 150.00

12. I hereby certify that the information supplied with this filing does not 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 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:** Michael McCann **3/14/08** **850-763-1601**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR