## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000026577

SMITH, MARIA I

11221 SW 136 ST

MIAMI, FL 33176

Name: Address:

City-St-Zip:

Apr 23, 2004 Secretary of State

Entity Name: SOUTHERN GOLF CARS, INC. **Current Principal Place of Business: New Principal Place of Business:** 12105 SW 114TH PLACE MIAMI, FL 33176 US **Current Mailing Address: New Mailing Address:** 12105 SW 114TH PLACE MIAMI, FL 33176 US FEI Number: 65-0741103 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, LILLIAN E SMITH, WALTER R 12105 SW 114 PL 10741 S.W. 47 STREET MIAMI, FL US MIAMI, FL 33176 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: WALTER R. SMITH 04/23/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Delete Title: () Change () Addition SMITH, WALTER R Name: Name: 10741 S.W. 47 STREET Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: SMITH. LILLIAN E Name: 10741 S.W. 47 STREET Address: Address: MIAMI, FL City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition SMITH, WALTER R II Name: Name: 11221 SW 136 ST Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: ( ) Delete Title: () Change () Addition

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

Name:

Address:

City-St-Zip:

VΡ SIGNATURE: MARIA I SMITH 04/23/2004