2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 159578

FILED Jan 06, 2004 Secretary of State

Entity Name: CANNON AUTOMOTIVE GROUP, INC.

Current F	Principal Place	of Business:	New Principal Place	of Business:
PO BOX 5	ORIDA AVE 5198 D, FL 33813550	00		
Current N	Mailing Address	s:	New Mailing Address	s:
PO BOX 5	ORIDA AVE 5198 D, FL 33813550	00		
El Number	r: 59-0603481	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	urrent Registered Agent:	Name and Address o	of New Registered Agent:
639 CRE	, RICHARD H SCENT LAKE D D, FL 33813	DR US	CANNON, RICHARD 5210 SOUTH FLORID LAKELAND, FL 33813	A AVE
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
i tiic Otat	e or riorida.			
				01/06/2004
	RE:	c Signature of Registered Ag	ent	01/06/2004 Date
SIGNATU	RE:Electroni	c Signature of Registered Ag Trust Fund Contribution ().	ent	
SIGNATU	RE:Electroni	Trust Fund Contribution ().		
lection Ca DFFICER itle: ame: ddress:	RE: Electroni mpaign Financing S AND DIRECT	Trust Fund Contribution (). CORS: Delete Y L, T LAKE DR		Date
SIGNATU	RE: Electroni mpaign Financing S AND DIRECT DS () CANNON, DANN 6802 CRESCEN LAKELAND, FL	Trust Fund Contribution (). ORS: Delete Y L, T LAKE DR 33813 Delete ARD H, T LAKE DR	ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR:
DFFICER itle: lame: ddress: itle: lame: ddress: ddress:	RE: Electroni mpaign Financing S AND DIRECT DS () CANNON, DANN 6802 CRESCEN LAKELAND, FL PD () CANNON, RICHA 6639 CRESCEN LAKELAND, FL	Trust Fund Contribution (). FORS: Delete Y L, T LAKE DR 33813 Delete ARD H, T LAKE DR 33813 Delete DELL A, NDS DRIVE	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS () 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.

SIGNATURE: RICHARD H CANNON P 01/06/2004