


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 19, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 182959</b> 1. Entity Name BLAKE CHEVROLET AND CADILLAC, INC.	
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Principal Place of Business 30401 S FEDERAL HWY. HOMESTEAD, FL 33030	Mailing Address P O BOX 218 HOMESTEAD, FL 33090-0218 US
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**DO NOT WRITE IN THIS SPACE**



02262004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-0733653	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

C L BLAKE, JR  
30401 S FED HWY  
SUITE 105  
HOMESTEAD, FL 33090-0218

**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BLAKE, C. L. JR. 30401 S FEDERAL HWY. HOMESTEAD, FL 33030
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS JUSTICE, MARLYS A. 30401 S FEDERAL HWY. HOMESTEAD, FL 33030
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPT CLOW, AL 30401 S FEDERAL HWY HOMESTEAD, FL 33030
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UN00000116999  
04/19/04-20002-008 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:  4-15-04 305-247-252  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #