## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jul 18, 2005 08:00 AM **DOCUMENT # 315217 Secretary of State** 1. Entity Name PERRY MOTORS INC Principal Place of Business Mailing Address 3865 E. GULF TO LAKE HWY 3865 E. GULF TO LAKE HWY INVERNESS, FL -32650-34453 INVERNESS, FL 32650 US 34453 07152005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For FEI Number
59-1164360 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KRULL, MARK R DO NOT WRITE 3865 E GULF TO LAKE HWY INVERNESS, FL 34453 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS 10. PD TITLE NAME KRULL, MARK R STREET ADDRESS 3865 E. GULF TO LAKE HWY INVERNESS, FL CITY-ST-7IP TITLE KRULL, LOIS A. NAUF U00000373352 07/18/05-80011-023 550.00 STREET ADDRESS 3865 E. GULF TO LAKE HWY INVERNESS, FL CITY-SI-7P TITLE SD NAME YOUNG, PATTI STREET ADDRESS 3865 E. GULF TO LAKE HWY DO NOT WRITE CITY-ST-ZIP INVERNESS, FL TĐ IN THIS SPACE ПΠЕ KRULL GEORGE R. NAME STREET ADDRESS 3865 E. GULF TO LAKE HWY CITY-ST-ZIP INVERNESS, FL NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 of 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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