2007 FOR PROFIT CORPORATION

DOCUMENT #F02000002348

ANNUAL REPORT

FILED May 04, 2007 8:00 am Secretary of State 05-04-2007 90091 009 ***150.00

1. Entity Nam CARBIZ I												
Principal Plac 7405 N. TAN SARASOTA, F	MAMI TRAIL	s	Mailing Address 7405 N. TAMIAMI TRAIL SARASOTA, FL 34243			นูบคา						
2. Principal P	Place of Busin	ness - No P.O. Box #	3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			01042007	Chg-P	c	CR2E03	4 (12/06)	
City & State			City & State				4. FEI Numb 98-231				No	oplied For ot Applicable
Zip	Country		Zíp	Count	iry		5. Certificate 7. Name and				8.75 Add ee Require	
6. Name and Address of Current Registered Agent							7. Name and	Address of	New Kegis	tered A	Anık	
GUERRANT, WILLIAM C JR. 101 E. KENNEDY BLVD.					Street Address (P.O. Box Number is Not Acceptable)							
SUITE 3700 TAMPA, FL 33802												
, , , ,	erikar iki			City						FL	Zip Cod	e
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												
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees												
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS,	CHANGES T	O OFFICER			
NAME STREET ADDRESS CITY-ST-ZIP	ł	CARL RLOW PLACE SITY PARK, FL 34201	☐ Delete		1						Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	8198 NAT	SS RICHARD TURE'S WAY #34 TON, FL 34243	☐ Delete		!						Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	ALDÓ ÔR ST W STE 930 O, ON M8X 2Y8	Delete	1							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6727 63R	STANTON CLARK D TERRACE E TON, FL 34203	☐ Delete			CF He	O, DIRE INTZ S 27 G3R PADENTON	CTOR STANTON O TERR U, FC	s C. ACR E 3420	- - 3	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete								☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	CITY-	ET ADDRESS ST-ZIP						☐ Change	Addition
12 Ihereby	certify that the	a information cumplind with	this filing does not qualify fo	e the eve	motions co	ntainad	Lin Chantor 116	Electido Sta	tutos tirret	and nortifi	without the in	viormation.

Indicated on this report or supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes: Further certify that he information indicated on this report or suppliemental 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: