2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PA

HED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytirne Phone #

Aug 09, 2005 8:00 am Secretary of State DOCUMENT # F04000001636 1. Entity Name 08-09-2005 90003 015 ***150.00 FRIEDMAN'S FINANCIAL GROUP, LLC Principal Place of Business Mailing Address 3422 OLD CAPITOL TRAIL, SUITE 700 9380 RT 130 N WILMINGTON DE 19808 PENNSAUKEN NJ 08110 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 59-3782646 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GOVERNMENT CARS DISTRIBUTION CENTER INC Street Address (P.O. Box Number is Not Acceptable) 8020 NW 7TH AVE **MIAMI FL 33150** City Zip Code 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 tibe if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PC TITLE TITLE ☐ Delete Change Addition FRIEDMAN, LINDA NAME NAME 2170 HENLEY COMMON STREET ADDRESS STREET ADDRESS HOLLAND PA 19866 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HILE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY -ST-ZIP-TOTY-ST-ZIP TITLE ☐ Detete ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 or trustee employered 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.

FILED

FRIEDMAN'S FINANCIAL GROUP, LLC

9380 Crescent Blvd., Pennsauken NJ 08110 Tel. 856-665-5505, FAX 856-665-7586

ATTACHMENT

August 3, 2005

\$F04000001636

Division of Corporations Annual Report Section PO Box 6850 Tallahassee, FL 32314

To Whom It May Concern:

It will be greatly appreciated if the late fees would be waived due to the late arrival of the Annual Report.

Sincerely.

Linda Friedman