

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # F05000003679

1. Entity Name
NETWORKCAR, INC.



Principal Place of Business
4510 EXECUTIVE DRIVE, SUITE 315
SAN DIEGO, CA 92121

Mailing Address
4510 EXECUTIVE DRIVE, SUITE 315
SAN DIEGO, CA 92121



04222008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
33-0872319

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES SCHNEIDER, KEITH 4510 EXECUTIVE DRIVE, SUITE 315 SAN DIEGO, CA 92121
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES KAUFMANN, CRAIG 4510 EXECUTIVE DRIVE, SUITE 315 SAN DIEGO, CA 92121
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC LEWIS, ROBERT 4510 EXECUTIVE DRIVE, SUITE 315 SAN DIEGO, CA 92121
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRE LEDDY, JEFFREY 4510 EXECUTIVE DRIVE, SUITE 315 SAN DIEGO, CA 92121
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Craig Kaufmann

4/22/08

770-391-6408

Date

Daytime Phone #