

REINSTATEMENT 2004 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 FEB -4 PM 1:06

DOCUMENT # F39421

1. Entity Name
BOB'S AUTO, INC.



Principal Place of Business
1803 THIRD ST., S.W.
WINTER HAVEN, FL 33880

Mailing Address
1803 THIRD ST., S.W.
WINTER HAVEN, FL 33880

REINSTATEMENT 04-05



2. Principal Place of Business

2938 Plantation Rd

3. Mailing Address

2938 Plantation Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03122004

Chg-P

CR2E034 (10/03)

City & State

WINTER HAVEN, FL

City & State

WINTER HAVEN, FL

4. FEI Number

59-2112335

Applied For

Not Applicable

Zip

33884

Country

USA

Zip

33884

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STEWART, ROBERT F
2938 PLANTATION RD.
WINTER HAVEN, FL 33884

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME STEWART, ROBERT F
STREET ADDRESS 2938 PLANTATION RD.
CITY-ST-ZIP WINTER HAVEN, FL 33884

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME 600043213886
STREET ADDRESS 12/06/04--01049--012 **150.00
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME 200046418612
STREET ADDRESS 02/11/05--01011--025 **150.00
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME 300044408649
STREET ADDRESS 01/10/05--01033--011 **608.75
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Robert F. Stewart

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-38-2004 863-326-0719

Date

Daytime Phone #