


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 27, 2004 08:00 AM
Secretary of State

DOCUMENT # H32967	
1. Entity Name BUDGET MUFFLERS, INC.	

Principal Place of Business 2040 N PINE AVE OCALA, FL 34475 US	Mailing Address 2040 N PINE AVE OCALA, FL 34475 US
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DO NOT WRITE IN THIS SPACE



08232004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2350858	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

DOBBS, MICHAEL
2040 N PINE AVE
OCALA, FL 34475

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD DOBBS, MICHAEL 3920 NW 115TH AVE OCALA, FL 34482
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DOBBS, LORI 3920 NW 115TH AVE OCALA, FL 34482
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09/27/04-80001-017 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Lori E. Dobbs Date: 8/23/04 Daytime Phone #: 352-732-0839

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR