

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H44250

FILED
Jul 06, 2005
Secretary of State

Entity Name: HOLIDAY AUTO MART, INC.

Current Principal Place of Business:

4107 EL REY RD
UNIT 1B
ORLANDO, FL 32808 US

New Principal Place of Business:

Current Mailing Address:

40 STONE GATE SOUTH
LONGWOOD, FL 32779 US

New Mailing Address:

943 BANANA LAKE ROAD
LAKE MARY, FL 32746 US

FEI Number: 59-2630687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS,DENNIS D.
40 STONEGATE S.
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

ADAMS,DENNIS D.
943 BANANA LAKE ROAD
LAKE MARY, FL 32746 US

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.

SIGNATURE:

07/06/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPT () Delete
Name: ADAMS, DEBRA,
Address: 40 STONEGATE S.
City-St-Zip: LONGWOOD, FL 32779

Title: PS () Delete
Name: ADAMS, DENNIS,
Address: 40 STONEGATE S.
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPT (X) Change () Addition
Name: ADAMS, DEBRA,
Address: 943 BANANA LAKE ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: PS (X) Change () Addition
Name: ADAMS, DENNIS,
Address: 943 BANANA LAKE ROAD
City-St-Zip: LAKE MARY, FL 32746

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA ADAMS

VP

07/06/2005

Electronic Signature of Signing Officer or Director

Date