2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # J04360

1. Entity Name
EUROPEAN AUTOMOTIVE CENTER, INC.

FILED
Jan 22, 2008 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
2090 N. MONROE STREET TALLAHASSEE, FL 32303	2090 N. MONROE STREET TALLAHASSEE, FL 32303

01152008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-2659948	Not Applicable

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

6. Name and Address of Current Registered Agent

BLOODWORTH, ROBERT
2090 N. MONROE
TALLAHASSEE, FL 32303

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)

U000000791256   DATE

01/23/08-80068-005 150.00

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	DP
NAME	BLOODWORTH, ROBERT
STREET ADDRESS	2302 ALDER DR.
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	VD
NAME	SUGGS, WARREN
STREET ADDRESS	621 FRANCES DR
CITY-ST-ZIP	HAVANA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Robert M. Bloodworth 1/16/08 (850)386-8788
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #