2004 FOR PROFIT CORPORATION

FILED May 18, 2004 8:00 am

ANNUAL REPORT		Secretary of State	
DOCUMENT # J26076		05-18-2004 90001 005 ***:	
1. Entity Name BOBBY'S AUTOMOTIVE AND MACHINE; SHOP	P, INC.		
	A Enter Contact of the Contact of th	gr	
Principal Place of Business Mailing Add	dress	The second of th	
302 FLORIDA AVENUE 302 FLOR	T-T. GAŁLOTT	d. (1815)	
FORT PIERCE, FL 34950 FORT PIER	RCE, FL 34950		
		05122004 No Chg-P CR2E034 (10/	03)
DO NOT WRITE IN TI	HIS SPACE -	4. FEI Number	Applied For
		59-2710716 Section 1 \$8.75	Not Applicable Additional
6. Name and Address of Current Registered Ag	<u> </u>	5. Certificate of Status Desired Fee Rec	
GALLOTT, ROBERT T. 302 FLORIDA AVENUE		DO NOT WRITE	
FORT PIERCE, FL 34950	4	IN THIS SPACE	
 The above named entity submits this statement for the purpose of the obligations of registered agent. 	f changing its registered office or registered	agent, or both, in the State of Florida. Lam familiar	with, and accept
SIGNATURE TO THE HILLIAND	freed my	33304	e i dinere, .
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required wi	ien reinstating) DATE	off regress
Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. El		0 May Be In accordance with s. 607.193(2)(b), F.S., the rior notice.
FILE NOW!!! FEE IS \$150.00 9. El Tr. Due by September 8, 2004 Tr. OFFICERS AND DIRECTORS	ection Campaign Financing \$5.0	0 May Be In accordance with s. 607.193(2)(b), F.S., the rior notice.
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 TO OFFICERS AND DIRECTORS TITLE DP MANY GALLOTT POREPT T	ection Campaign Financing \$5.0 ust Fund Contribution. Addec	0 May Be In accordance with s. 607.193(2	(b), F.S., the rior notice.
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 10. OFFICERS AND DIRECTORS TITLE DP NAME GALLOTT, ROBERT T. STREET ADDRESS 150.00 Signature, typed or printed name of registered agent and title if applicable. 9. Ele	ection Campaign Financing \$5.0	0 May Be In accordance with s. 607.193(2	b(b), F.S., the rior notice.
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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)(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.

STREET ADDRESS CITY-ST-ZIP

>>2 46/ 0902 Daytime Phone #