2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# K36625

Entity Name: BOSH AUTO WHOLESALE, INC.

FILED Jul 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2558 MERCHANT AVE ODESSA, FL 33556 US

Current Mailing Address: New Mailing Address:

 10108 LAKE COVE LN
 2558 MERCHANT AVE

 TAMPA, FL 33618 US
 ODESSA, FL 33556 US

FEI Number: 59-2911050 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FULLER, CHARLES D

10108 LAKE COVE LN

TAMPA, FL 33618 US

ROBERT, DEPEW H

1135 LEMON TREE LN

PALM HARBOR, FL 34683 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: ROBERT H DEPEW 07/09/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 FULLER, CHARLES D
 Name:
 ORTMAN, RICHARD G

 Address:
 10108 LAKE COVE LN
 Address:
 1624 TAWNYBERRY CT

 City-St-Zip:
 TAMPA, FL 33618
 City-St-Zip:
 TRINITY, FL 34655

Title: VP () Delete Title: VP (X) Change () Addition
Name: DEPEW ROBERT H
Name: DEPEW ROBERT H

 Name:
 DEPEW, ROBERT H
 Name:
 DEPEW, ROBERT H

 Address:
 1135 LEMON TREE LN
 Address:
 1135 LEMON TREE LN

 City-St-Zip:
 PALM HARBOR, FL 33618
 City-St-Zip:
 PALM HARBOR, FL 34683

Title: TRES () Delete Title: TRES (X) Change () Addition Name: FULLER, CHARLES D Name: ORTMAN, RICHARD G

Address: 10108 LAKE COVE LANE Address: 1624 TAWNYBERRY CT
City-St-Zip: TAMPA, FL 33618 US City-St-Zip: TRINITY, FL 34655 US

Title: SEC () Delete Title: () Change () Addition

 Name:
 DEPEW, ROBERT H
 Name:

 Address:
 1135 LEMON TREE LN
 Address:

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROBERT H DEPEW VP 07/09/2007