

ANNUAL REPORT**DOCUMENT # L16362**1. Entity Name
JAY'S AUTO WHOLESALE, INC.**FILED**
Feb 26, 2007 08:00 AM
Secretary of StatePrincipal Place of Business
% ANDREW J. JOSKO
1315 61ST AVENUE EAST
BRADENTON, FL 34203Mailing Address
% ANDREW J. JOSKO
1315 61ST AVENUE EAST
BRADENTON, FL 34203

02092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE4. FEI Number
65-0144975Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required**6. Name and Address of Current Registered Agent**JOSKO, ANDREW J.
1315 61ST AVENUE EAST
BRADENTON, FL 34203**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)**FILE NOW!!! FEE IS \$150.00**
After May 1, 2007 Fee will be \$550.009. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees**10. OFFICERS AND DIRECTORS**TITLE D
NAME JOSKO, ANDREW J.
STREET ADDRESS 7457 COVE TERRACE
CITY-ST-ZIP SARASOTA FL,TITLE D
NAME JOSKO, CAREN M.
STREET ADDRESS 7457 COVE TERRACE
CITY-ST-ZIP SARASOTA FL,TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
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NAME
STREET ADDRESS
CITY-ST-ZIP000000649135
03/07/07-80037-006 150.00**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-07 941-753-2056
Date Daytime Phone #