

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L46113

FILED
Apr 08, 2008
Secretary of State

Entity Name: AUTOMOTIVE BUSINESS CONSULTANTS, INC.

Current Principal Place of Business:

5353 N FEDERAL HWY
STE 211
FT LAUDERDALE, FL 33308 US

Current Mailing Address:

5353 N FEDERAL HWY
STE 211
FT LAUDERDALE, FL 33308 US

FEI Number: 65-0168321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRONRATH, GARY
5353 N FEDERAL HWY #211
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

5353 N FEDERAL HWY
STE 213
FT LAUDERDALE, FL 33308 US

New Mailing Address:

5353 N FEDERAL HWY
STE 213
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

FRONRATH, GARY
5353 N FEDERAL HWY #213
FORT LAUDERDALE, FL 33308 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:

04/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRONRATH, GARY,
Address: 5353 N FEDERAL HWY #211
City-St-Zip: FT LAUDERDALE, FL 33308

Title: S () Delete
Name: FRONRATH, ROBIN
Address: 5353 N FEDERAL HWY #211
City-St-Zip: FT. LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FRONRATH, GARY,
Address: 5353 N FEDERAL HWY #213
City-St-Zip: FT LAUDERDALE, FL 33308

Title: S (X) Change () Addition
Name: FRONRATH, ROBIN
Address: 5353 N FEDERAL HWY #213
City-St-Zip: FT. LAUDERDALE, FL 33308

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: GARY FRONRATH

PD

04/08/2008

Electronic Signature of Signing Officer or Director

Date