2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 11, 2004 08:00 AM DOCUMENT # L79911 **Secretary of State** PALM BEACH AUTO EXCHANGE, INC. Principal Place of Business Mailing Address 1002 S DIXIE HWY 16 MILLER ROAD LAKE WORTH, FL 33460 LAKE WORTH, FL 33461 03072004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0204404 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LASORTE, ALFRED A. JR. ESQ DO NOT WRITE 801 SPENCER DRIVE WEST PALM BEACH, FL 33409 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 Plorida. 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 reinstalling) U000000085051 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. U3/11/04-80032-011 158.75-Added to Fees 10. OFFICERS AND DIRECTORS PD វាវា.៩ YOUNG, MAURICE. NAME 16 MILLER ROAD STREET ADDRESS. CITY-ST-ZIP LAKE WORTH, FL TETE VST YOUNG, KATHLEEN 16 MILLER ROAD STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL TITLE MAME STREET ADDRESS DO NOT WRITE CETY-SE-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MARIE

12. I hereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(). 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 logist 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:

STREET ADDRESS City - St - Zip

NALSE STREET ADDRESS CITY-ST-ZIP

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