2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# P00000020943

Entity Name: DR. "G", ULTIMATE BMW REPAIR SPECIALIST, INC.

Current Principal Place of Business:

1750 N.W. 38TH AVENUE
LAUDERHILL, FL 33311

New Principal Place of Business:

Current Mailing Address:

1750 N.W. 38TH AVENUE
LAUDERHILL, FL 33311

New Mailing Address:

FEI Number: 65-1019548 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HYDE, LUCILLE
6311 SW 7TH CT
MARGATE, FL 33068 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HYDE, GLENROY
Address: 6311 SW 7 COURT
City-St-Zip: MARGATE, FL 33068

Title: SEC ( ) Delete
Name: HYDE, CORITHA
Address: 7426 S.W. 14TH PLACE
City-St-Zip: N. LAUDERDALE, FL 33068

Title: VP ( ) Delete
Name: HYDE, LUCILLE
Address: 6311 SW 7 COURT
City-St-Zip: MARGATE, FL 33068

Title: VP ( ) Delete
Name: HYDE, GLENVILLE
Address: 6311 SW 7 COURT
City-St-Zip: MARGATE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: LUCILLE HYDE VP 04/27/2007

Electronic Signature of Signing Officer or Director — Date