

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90500 029 ***150.00

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DOCUMENT # P01000002108 1. Entity Name YOUR AUTO.EXPRESS, INC.																																																																																																																																																											
Principal Place of Business 2892 GREEN MEADOW COURT CLEARWATER, FL 33761			Mailing Address 2892 GREEN MEADOW COURT CLEARWATER, FL 33761 US																																																																																																																																																								
2. Principal Place of Business 2494 BAYSHORE BLVD Suite, Apt. #, etc. SUITE 102		3. Mailing Address Suite, Apt. #, etc.																																																																																																																																																									
City & State DUNEDIN FL		City & State																																																																																																																																																									
Zip 34698-2002		Country USA		4. FEI Number 59-3689885																																																																																																																																																							
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable																																																																																																																																																							
6. Name and Address of Current Registered Agent LUBOTSKY, DAVID A 2892 GREEN MEADOW CT. CLEARWATER, FL 33761				7. Name and Address of New Registered Agent Name LUBOTSKY, DAVID A Street Address (P.O. Box Number is Not Acceptable) 2494 BAYSHORE BLVD SUITE 102 City DUNEDIN FL Zip Code 34698-2002																																																																																																																																																							
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: <u>David A Lubotsky</u> <u>David A Lubotsky</u> <u>4/18/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																																								
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>David A Lubotsky</u> <u>David A. Lubotsky</u> <u>4/18/05</u> <u>(727) 733-5504</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																																											