2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000003302

Entity Name: THE AUTO SPOT, INC.

FILED Apr 23, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

1301 RIVERPLACE BOULEVARD 9718 TOUCHTON ROAD SUITE 1609 JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

1301 RIVERPLACE BOULEVARD 9718 TOUCHTON ROAD SUITE 1609 JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32207

FEI Number: 59-3736000 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PEEK, EUGENE G III MOURAO, CAMI G
1301 RIVERPLACE BOULEVARD 9718 TOUCHTON ROAD
SUITE 1609 JACKSONVILLE, FL 32246
JACKSONVILLE, FL 32207

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: CAMI MOURAO 04/23/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: () Change () Addition

 Name:
 MOURAO, CAMI G
 Name:

 Address:
 233 NORTH MILL VIEW WAY
 Address:

 City-St-Zip:
 PONTE VEDRA BEACH, FL 32082
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 MOURAO, JOHN D
 Name:

 Address:
 233 NORTH MILL VIEW WAY
 Address:

 City-St-Zip:
 PONTE VEDRA BEACH, FL 32082
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CAMI MOURAO PRES 04/23/2004