2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2006 08:00 AM Secretary of State DOCUMENT # P01000012149 1. Entity Name BETHEL AUTO SALES INCORPORATED Principal Place of Business Mailing Address 1600 N. FLORIDA AVENUE 1600 N. FLORIDA AVENUE LAKELAND, FL 33805 LAKELAND, FL 33805 03082006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 36-4498811 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent GEORGE, JOSEPH DO NOT WRITE 1600 N. FLORIDA AVENUE LAKELAND, FL 33805 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 Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE 18 \$150,00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. RRE NAME GEORGE, JOSEPH STREET ADDRESS 1600 N. FLORIDA AVENUE CHTY-ST-27P LAKELAND, FL 33805 U00000502867 TITLE 04/26706-80008-013 150.00 NAME STREET ADDRESS CITY-ST-ZIF TITLE NAMÉ STIMET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-21P กกะ NAME STREET ADDRESS CITY -ST - ZIP TTLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 truetee empowered to execute this report as required by Chapter 807, 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:

NAME STREET ADDRESS CUTY-ST-ZIP

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