


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90208 007 ***150.00

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|---|---|
| DOCUMENT # P01000033377 1. Entity Name BRW AUTO INC. |  |
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| Principal Place of Business 5715 SEMINOLE BLVD SEMINOLE, FL 33772 | Mailing Address 5715 SEMINOLE BLVD SEMINOLE, FL 33772 <i>PO Box 60096 ST Pete FL 33787</i> |
|---|---|

54039136



01132004 No Chg-P CR2E034 (10/03)

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|-----------------------------|-------------------------------|
| 4. FEI Number 59-3706797 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent THOMAS, BRIAN O 5715 SEMINOLE BLVD SEMINOLE, FL 33772 |
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 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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| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD OTHOUSE, WAYNE 5715 SEMINOLE BLVD SEMINOLE, FL 33772 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V THOMAS, RONALD L 5715 SEMINOLE BLVD SEMINOLE, FL 33772 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V THOMAS, BRIAND D 5715 SEMINOLE BLVD SEMINOLE, FL 33772 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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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: *Brian Thomas* **4/20/04** **727 804 6454**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #