2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2004 08:00 AM Secretary of State **DOCUMENT # P01000060526** TERRANCE A+ AUTOMOTIVE INC. Principal Place of Business Mailing Address 4918 GOLF CLUB PKWY. 4918 GOLF CLUB PKWY. MOBILE MOBILE ORLANDO, FL 32808 ORLANDO, FL 32808 No Chg-P CR2E034 (10/03) 04222004 Applied For 4. FEI Number 59-3723556 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent ROBERSON, TERRANCE 4918 GOLF CLUB PKWY. ORLANDO, FL 32808 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. Significially, typed or privide name of registered agent and title if applicable. (NOTE: Registered Agent signature required whon reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U00000135655 Trust Fund Contribution. Added to Fees 04/28/04-80069-003 10. OFFICERS AND DIRECTORS nite PD NAME ROBERSON, TERRANCE STREET ADDRESS 4918 GOLF CLUB PKWY. CITY-ST-ZIP ORLANDO, FL 32808 TITLE NAME STREET ADDRESS CSY-ST-7/2 THELE NAME STREET ADDRESS CHY-SI-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP TITLE SAME STREET ADDRESS CAY-ST-ZP nne NAME STREET ADDRESS CITY-SI-ZIP 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 each; 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.

MONATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED