2008 FOR PROFIT CORPORATION

Apr 09, 2008 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # P01000089499 04-09-2008 90114 001 ***150.00 MIAMI BASS CAR DEALER, INC. 04-09-2008 90114 002 *****8.75 Principal Place of Business Mailing Address 17304 WALKER AVENUE #117 17304 WALKER AVENUE #117 66006196 MIAMI, FL 33157 US MIAMI, FL 33157 US 03212008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1138911 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALLEN, GREG DO NOT WRITE C/O MIAMI: BASS CAR DEALER INC 17304 WALKER AVENUE #117 IN THIS SPACE MIAMI, FL 33157 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) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS PSTD TITLE NAME ALLEN, GREGORY E 17304 WALKER AVENUE #117 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33157 TITLE NAME STREET ADDRESS CITY-ST-7P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

NAME OF SIGNING OFFICER OR DIRECTOR