

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000115034

Entity Name: SHOWROOM AUTO SALES, INC.

FILED
Feb 14, 2008
Secretary of State

Current Principal Place of Business:

4603 S US HWY. 1
FORT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

4603 S US HWY 1
FORT PIERCE, FL 34982

New Mailing Address:

FEI Number: 65-1160001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRY, JAMES
1847 SW NEWPORT ISLES BLVD
PORT SAINT LUCIE, FL 34953 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: MERINGOLA, YOLANDA
Address: 4603 S US HWY 1
City-St-Zip: FORT PIERCE, FL 34982

Title: VP () Delete
Name: PERRY, JAMES
Address: 4603 S US HWY 1
City-St-Zip: FORT PIERCE, FL 34982

Title: SEC () Delete
Name: PERRY, JAMES
Address: 4603 S US HWY 1
City-St-Zip: FORT PIERCE, FL 34982

Title: TRE () Delete
Name: PERRY, JAMES
Address: 4603 S US HWY 1
City-St-Zip: FORT PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: PERRY, YOLANDA
Address: 4603 S US HWY 1
City-St-Zip: FORT PIERCE, FL 34982

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JAMES PERRY

VP

02/14/2008

Electronic Signature of Signing Officer or Director

Date