## 2005 FOR PROFIT CORPORATION 'ANNUAL REPORT

5/5/2005-90100-008-\$125.00-\$125.00

DOCUMENT # P02000010431 LIBERTY AUTOMOTIVE GROUP, INC.

Principal Place of Business

Mailing Address

699 MASON AVE. DAYTONA BEACH, FL 32117

539 N OLEANDER DAYTONA BEACH, FL 32118 05 JUN 15 PH 3:39

SEGRE STATE TALLAHASSTE, FLORIDA JUU48943



## DO NOT WRITE IN THIS SPACE

01112005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For 04-3593014 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 

Fee Required

6. Name and Address of Current Registered Agent

BRETZEL, MICHAEL 539 N OLEANDER DAYTONA BEACH, FL 32118

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the obligat	named entity submits this statement for the prions of registered agent.	urpose of changing its regis	stered office or i	egistered agent, or bo	oth, in the State of Florida. I am lamilliar with, and acce	ρŧ
SIGNATURE.	Signature, typed or printed name of registered agent and title if	apolicable. (NOTE Parti	stered Apert elegation	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing \$		\$5.00 May Be Added to Fees		_
10.	OFFICERS AND DIREC	TORS				_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST BRETZEL, MICHAEL 539 N OLEANDER DAYTONA BEACH, FL 32118					
IITLE NAME STREET ADDRESS CITY-ST-ZIP				06,	100056430681 /22/0501023003 **25.00	)
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE	
TITLE HAME STREET ADORESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. Thereby o	entity that the information supplied with this file	no does not quality for the s	vernation states	t in Section 110 07/3)	(i) Elevisia Creation I further easily that the information	

indicated on this report or supplemental report is true and courage not quarry 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: \_

SIGNATURE AND TOPS OF PROFIED HAME OF BOOK