

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000073592

Entity Name: ISLAND MOTORCARS, INC.

FILED  
Apr 21, 2008  
Secretary of State

## Current Principal Place of Business:

2512 CRILL AVE  
PALATKA, FL 32177

## New Principal Place of Business:

1339 OLD DIXIE HWY  
ST AGUSTINE, FL 32084

## Current Mailing Address:

P.O. BOX 100  
ELKTON, FL 32033

## New Mailing Address:

1835 US HWY 1 SUITE#119-189  
ST AUGUSTIE, FL 32084

FEI Number: 82-0553846

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HADJIS, GEORGE  
2512 CRILL AVE  
PALATKA, FL 32177 US

## Name and Address of New Registered Agent:

HADJIS, GEORGE  
1835 US HWY 1 SUITE#119-189  
ST AUGUSTINE, FL 32084 US

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: GEORGE HADJIS

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HADJIS, GEORGE  
Address: PO BOX 100  
City-St-Zip: ELKTON, FL 32033

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HADJIS, GEORGE  
Address: US HWY 1 SUITE#119-189  
City-St-Zip: ST AUGUSTINE, FL 32084

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: GEORGE HADJIS

D

04/21/2008

Electronic Signature of Signing Officer or Director

Date