2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# P02000119098

Entity Name: CAMBRIDGE AUTO CLUB, INC.

Current Principal Place of Business:

2800 BISCAYNE BLVD.
STE 777
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

2800 BISCAYNE BLVD.
STE 777
MIAMI, FL 33137

New Mailing Address:

FEI Number: 20-0031057 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSEN, SUSAN M
2800 BISCAYNE BLVD.
STE 777
MIAMI, FL 33137

Name and Address of New Registered Agent:

MEADOWS, ALISHA M
2800 BISCAYNE BLVD.
STE 777
MIAMI, FL 33137

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: ALISHA M MEADOWS 04/30/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MEADOWS, TOMMY D
Address: 2800 BISCAYNE BLVD.STE 777
City-St-Zip: MIAMI, FL 33137

Title: VPD ( ) Delete
Name: ROSEN, SUSAN M
Address: 2800 BISCAYNE BLVD., SUITE 777
City-St-Zip: MIAMI, FL 33137

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MEADOWS, ALISHA M
Address: 2800 BISCAYNE BLVD.STE 777
City-St-Zip: MIAMI, FL 33137

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

Title: SD ( ) Change (X) Addition
Name: MEADOWS, TOMMY D
Address: 2800 BISCAYNE BLVD., SUITE 777
City-St-Zip: MIAMI, FL 33137

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALISHA M MEADOWS PD 04/30/2004
Electronic Signature of Signing Officer or Director Date