


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90262 020 \*\*\*150.00

<b>DOCUMENT # P02000123324</b> 1. Entity Name <b>EXQUISITE AUTOS INTERNET SERVICES, INC.</b>																			
Principal Place of Business <b>1518 SOUTH DIXIE HIGHWAY</b> <b>WEST PALM BEACH, FL 33496 US</b>		Mailing Address <b>1518 SOUTH DIXIE HIGHWAY</b> <b>WEST PALM BEACH, FL 33496 US</b>																	
2. Principal Place of Business <b>1225 Okeechobee Rd</b> Suite, Apt. #, etc. <b>Suite C</b> City & State <b>W. Palm Beach, FL</b> Zip <b>33401</b> Country <b>Palm Beach</b>		3. Mailing Address <b>13253 Doubletree Cir.</b> Suite, Apt. #, etc. City & State <b>Wellington, FL</b> Zip <b>33414</b> Country <b>Palm Beach</b>																	
4. FEI Number <b>14-1863733</b>		Applied For <input type="checkbox"/> Not Applicable																	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		04072004 Chg-P CR2E034 (10/03)																	
6. Name and Address of Current Registered Agent <b>BARSON, SELETA</b> <b>1518 S DIXIE HWY</b> <b>WEST PALM BEACH, FL 33401</b>		7. Name and Address of New Registered Agent Name <b>Seleta Barson</b> Street Address (P.O. Box Number is Not Acceptable) <b>1225-C Okeechobee Rd.</b> City <b>W. Palm Beach</b> <b>FL</b> Zip Code <b>33414</b>																	
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 <u><b>Seleta Barson</b></u> DATE <b>4/14/04</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>																			
<b>FILE NOW!!! - FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE</td> <td style="width:70%;">P <input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>BARSON, SELETA</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1518 S DIXIE HWY</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WEST PALM BEACH, FL 33401</td> </tr> </table>		TITLE	P <input type="checkbox"/> Delete	NAME	BARSON, SELETA	STREET ADDRESS	1518 S DIXIE HWY	CITY-ST-ZIP	WEST PALM BEACH, FL 33401	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE</td> <td style="width:70%;">Seleta Barson <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>1225 Okeechobee Rd, Suite C</td> </tr> <tr> <td>STREET ADDRESS</td> <td>W. Palm Beach, FL 33401</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	Seleta Barson <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	1225 Okeechobee Rd, Suite C	STREET ADDRESS	W. Palm Beach, FL 33401	CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify 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 those empowered.																			
SIGNATURE: <u><b>Seleta Barson</b></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																			