2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# P03000003405

Entity Name: CAR RADIOS, MOBILE INC.

Current Principal Place of Business:

6162 FAULKNER DR
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

PO BOX 7053
JACKSONVILLE, FL 32238

New Mailing Address:

FEI Number: 20-0333059 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOONEY, TIMOTHY E SR
6162 FLAULKNER DR
JACKSONVILLE, FL 32244 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: P ( ) Delete
Name: NEWLY, TIM
Address: 6162 FRAULKER DR.
City-St-Zip: JACKSONVILLE, FL 32245

Title: VP ( ) Delete
Name: NOUUG, SUSAN
Address: 6162 FALKNER
City-St-Zip: JACKSONVILLE, FL 32244

Title: ST ( ) Delete
Name: MOONEY, TIM
Address: 6162 FALKNER
City-St-Zip: JACKSONVILLE, FL 32238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: NOONEY, TIMOTHY
Address: 6162 FAULKNER DR
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP (X) Change ( ) Addition
Name: NOONEY, SUSAN
Address: 6162 FALKNER
City-St-Zip: JACKSONVILLE, FL 32244

Title: ST (X) Change ( ) Addition
Name: NOONEY, TIM
Address: 6162 FAULKNER DR
City-St-Zip: JACKSONVILLE, FL 32244

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: TIMOTHY E NOONEY SR P 01/13/2009

Electronic Signature of Signing Officer or Director Date