2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000033202

FILED Feb 11, 2005 8:00 am Secretary of State 02-11-2005 90040 035 ***150.00

1. Entity Name AUTOEX	e CEL FLORIDA, INC.				02-11-2003 3		0.00	
Principal Place	e of Business	Mailing Address						
C/O JAX STOP	HNS BLUFF RD SOUTH RAGE MALL UNIT F105 .E, FL 32246	P O BOX 1914 KENNESAW, GA 30156		4 1891(65)	. 60180 Milit Kraita 60 111 80 11	5001366	IIDIBAL II PADI	
2 Principal Pi	lace of Business	3. Mailing Address						
	Stone haven Ct F	Sc. coe		[II BEIEG WIED ILHE MEN DEILE		
Suite, Apt.		Suite, Apt. #, etc.		02082005	Chg-P	CR2E034 (10/0)	3)	
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City & State	POR FL	City & State		4. FEI Numb		⊢ —+	Applied For Not Applicable	
3204	Country USH	Zip	Country	5. Certificate	of Status Desired	□ \$8.75 A		
	6. Name and Address of Current I	Registered Agent		7. Name an	Address of New R	Registered Agent		
WOOTED.	The section of the se		Name K	Stor To	h~ 7	eries e si		
KOSTRO, JOHN J 3424 SOUTHSIDE BLVD ALLESS			Street Addr	Street Address (P.O. Box Number is Not Acceptable)				
UNIT 8025			200	(1)	- 1 h			
JACKSON	VILLE, FL 32216	Corver	393	393 Stonehaven Ct. E				
			CinOw	Cin Orange Park FL 32065				
	named entity submits this statement for	the purpose of changing its r	egistered office or req	gistered agent, or bo	oth, in the State of Fk			
the obligations of registered agent. SIGNATURE (Same) John J. Kostro (rent		2-08-0	<u> </u>	
 	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered Agent signature re	equired when reinstating)	T	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.								
		T		\$5.00 May Be Added to Fees				
	ay 1, 2005 Fee will be \$550.0 OFFICERS AND	Trust Fund Contr		Added to Fees	/CHANGES TO OFF	FICERS AND DIRECTO		
10.	ay 1, 2005 Fee will be \$550.0 OFFICERS AND	Trust Fund Contr	11.	Added to Fees	/CHANGES TO OFF	FICERS AND DIRECTO		
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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 like empowered.

SIGNATURE:

770-424-0865