## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000075669

Entity Name: BLC AUTOMOTIVE ENTERPRISES, INC.

FILED Mar 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3617 CROWN POINT ROAD 3617 CROWN POINT ROAD

SUITE #2 SUITE #10

JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

3617 CROWN POINT ROAD PO BOX 57487

SUITE #2 JACKSONVILLE, FL 322417487 JACKSONVILLE, FL 32257

FEI Number: 16-1677037 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HERNANDEZ, MEREDITH A
3617 CROWN POINT ROAD
SUITE #2

HERNANDEZ, MEREDITH A
3617 CROWN POINT ROAD
SUITE #10

JACKSONVILLE, FL 32257 US SUITE #10

JACKSONVILLE, FL 32257 US JACKSONVILLE, FL 32257 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: MEREDITH ALLEN HERNANDEZ 03/17/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: PSTD (X) Change ( ) Addition

 Name:
 FLEMING, MARK A
 Name:
 FLEMING, MARK A

 Address:
 P.O. BOX 24668
 Address:
 P.O. BOX 57487

City-St-Zip: JACKSONVILLE, FL 32241 City-St-Zip: JACKSONVILLE, FL 322417487

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 PAUL, DAVID
 Name:
 REYES, BRANDY

 Address:
 P.O. BOX 24668
 Address:
 P.O. BOX 57487

City-St-Zip: JACKSONVILLE, FL 32241 City-St-Zip: JACKSONVILLE, FL 322417487

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK FLEMING PSTD 03/17/2006