

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2004 8:00 am Secretary of State

ANNUAL REPORT			Secretary of State				
DOCUMENT # P03000126906 1. Entity Name AZALEA AUTOMOTIVE, INC.			04-30-2004 90283 042 ***150.00				
Principal Place of Business	Mailing Address	THE TOTAL PROPERTY OF THE PARTY		J	3011T	JJ	
731-54TH AVE N ST-PETERSBURG, FL-33703	7 31-54TH AVE N ST- PETERSBURG, FL 33703						
2. Principal Place of Business	3. Mailing Address	h ase					
Suite, Apt. #, etc.	Suite, Apt. #, etc.		02122004	Chg-P	CR2E034	· · · ·	
StiPetersburg, F	- St. Petersburg, Ft		4. FEI Number 84	-162450		Applied For Not Applicable	
33710 COUNTY SA	33710	untry USA		of Status Desired	☐ Fe	3.75 Additional e Required	
6. Name and Address of Current Registered Agent		.	7. Name and Address of New Registered Agent				
BARNETT, KENNETH W 731 54TH AVE N ST PETERSBURG, FL 33703		Name Street Address (Street Address (P.O. Box Number is Not Acceptable)				
		City			FL	Zip Code	
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 4-13-04							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees							
10. OFFICERS AND DIRECTORS 11.			ADDITIONS/0	CHANGES TO OFF	ICERS AND D	IRECTORS IN 11	

TITLE ☐ Delete Addition BARNETT, KENNETH W NAME NAME STREET ADDRESS 731 54TH AVE N STREET ADDRESS 33709 CITY-ST-ZIP ST PETERSBURG, FL 33703 CITY-ST-ZIP Change ☐ Defete TITLE Addition COYLE, THOMAS NAME NAME STREET ADDRESS 731 54TH AVE N STREET ADDRESS ST PETERSBURG, FL 33703 CITY-ST-ZIP CITY-ST-ZIP סוו TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH W. BARNETT, PRES.

(121)343-4246

Daytime Phone #

