

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147074

Entity Name: SZABO AUTO SALES, INC.

FILED  
May 14, 2008  
Secretary of State

## Current Principal Place of Business:

1109 ANGIE ROAD  
FT. PIERCE, FL 34947

## New Principal Place of Business:

162 MELTON DRIVE  
FT. PIERCE, FL 34982

## Current Mailing Address:

PO BOX 7309  
PT ST LUCIE, FL 349857309

## New Mailing Address:

FEI Number: 38-6061307

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

SZABO, ALEX S  
534 SE THANKSGIVING AVE  
PT ST LUCIE, FL 34985 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: ALEX S SZABO

05/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: SZABO, ALEX S  
Address: 1909 SW BILTMORE ST  
City-St-Zip: PT ST LUCIE, FL 34984

Title: VSD ( ) Delete  
Name: SZABO, MAGDOLNA J  
Address: 1909 SW BILTMORE ST  
City-St-Zip: PT ST LUCIE, FL 34984

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: SZABO, ALEX S  
Address: 162 MELTON DRIVE  
City-St-Zip: FORT PIERCE, FL 34982

Title: VSD (X) Change ( ) Addition  
Name: SZABO, MAGDOLNA J  
Address: 162 MELTON DRIVE  
City-St-Zip: FORT PIERCE, FL 34982

Title: TRES ( ) Change (X) Addition  
Name: SZABO, ALEX S  
Address: 162 MELTON DRIVE  
City-St-Zip: FORT PIERCE, FL 34982

Title: SEC ( ) Change (X) Addition  
Name: SZABO, MAGDOLNA J  
Address: 162 MELTON DRIVE  
City-St-Zip: FORT PIERCE, FL 34982

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: ALEX S SZABO

PTD

05/14/2008

Electronic Signature of Signing Officer or Director

Date