2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000021357

Current Mailing Address:

Entity Name: FAMILY CAR SERVICE & SALES, INC.

FILED Aug 03, 2005 Secretary of State

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

4916 W LINEBAUGH AVE STE 101 4916 W LINEBAUGH AVE TAMPA, FL 33624

SUITE #102 TAMPA, FL 33624

New Mailing Address:

4916 W LINEBAUGH AVE STE 101 4916 W LINEBAUGH AVE

TAMPA, FL 33624 **SUITE #102** TAMPA, FL 33624

FEI Number: 20-0687642 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HOLBROOKS, LESTER W 4916 W LINEBAUGH AVE STE 101 TAMPA, FL 33624

HOLBROOKS, LESTER W 4916 W LINEBAUGH AVE SUITE # 102 TAMPA, FL 33624 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: 08/03/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

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

Title: () Delete Title: (X) Change () Addition HOLBROOKS, LESTER W HOLBROOKS, LESTER W Name: Name:

4916 W LINEBAUGH AVE STE 101 Address: 4916 W LINEBAUGH AVE SUITE #102 Address:

City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33624

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

Name: Name: HOLBROOKS, LINDA C Address: Address: 16206 MARSHFIELD DR TAMPA, FL 33624 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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.

Ρ SIGNATURE: LESTER W HOLBROOKS 08/03/2005