2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000089424

ASH, CARLTON D

TAMPA, FL 33604

8701 C NORTH NEBRASKA AVE.

Name:

Address:

City-St-Zip:

Entity Name: MAJESTIC AUTO GROUP, INC

FILED Jun 01, 2005 Secretary of State

_many man		107,010 01,001,110.				
Current P	rincipal Plac	e of Business:	New Prince	New Principal Place of Business:		
8701 C NC TAMPA, F	ORTH NEBRA L 33604	SKA AVE.				
Current M	lailing Addre	ss:	New Mailing Address:			
8701 C NORTH NEBRASKA AVE. TAMPA, FL 33604			31101 WOLFERT PLACE WESLEY CHAPEL, FL 33543			
FEI Number	: 51-0511388	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and Address of New Registered Agent:			
1840 SW 2 4TH FLOO		.A.				
	named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered o	office or registered agent, or	both,
SIGNATU	RE:					
	Electro	nic Signature of Registered Age	ent		Date	
		93(2)(b), F.S., the corporation did no	ot receive the prior notic	e.		
OFFICER	S AND DIREC	CTORS:	ADDITION	IS/CHANGES	TO OFFICERS AND DIREC	CTORS
Title: Name: Address: City-St-Zip:	SMITH, DERE	H NEBRASKA AVE.	Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	RANATHUNGA	NEBRASKA AVE.	Title: Name: Address: City-St-Zip:	CARLTON, ASH	I NEBRASKA AVE.	
Title: Name: Address: City-St-Zip:	PERERA, NILL	H NEBRASKA AVE.	Title: Name: Address: City-St-Zip:) Change ()Addition	
Title:	Т () Delete	Title:) Change()Addition	

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 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.

Name:

Address:

City-St-Zip:

	SIGNATURE: DEREK SMITH	PD	06/01/2005
--	------------------------	----	------------