2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # P04000132994 **Secretary of State** 06-09-2005 90002 016 ***150.00 CARS TO GO OF NORTH FLORIDA INC. Mailing Address Principal Place of Business 369 BLANDING BLVD. 592 BRIDGESTONE RD N JACKSONVILLE, FL 32259 #N04 ORANGE PARK, FL 32073 2. Principal Place of Business Suite, Apt. #, etc. 05312005 Chq-P CR2E034 (10/03) 4. FEI Number 26- 164 Applied For City & State Not Applicable Zip Countr Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ALTOUM, SALAH E Street Address (P.O. Box Number is Not Acceptable) 592 BRIDGESTONE RD N JACKSONVILLE, FL 32259 City 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ☐ Delete TITLE Addition TITLE NAME ALTOUM, SALAH E NAME STREET ADDRESS 592 BRIDGESTONE RD N STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE, FL 32259 ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change Addition ☐ Delete TITLE 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 ☐ Change ☐ Addition ☐ Delete TITLE TITLE 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 trusted 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.

FILED

Jun 09, 2005 8:00 am

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ATTACHMENT

40087631

Cars fogo of North Floroda Ive

369 Blanding Blud # NO4

0. Park-FL 32073

Document (# P04000132994)

Dear SiR

this is the First Year. I File For an annual Report. I never Received the annual Form For Filing From your Division, so I got one coff the internet.

SalaH. E. Altoum. 5-31-05