

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000012270

Entity Name: FRANCHISE AUTO SALES, INC.

FILED
Jan 21, 2007
Secretary of State

Current Principal Place of Business:

1325 ALTAMONTE DRIVE
SUITE 11
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

1325 E ALTAMONTE DRIVE
SUITE 141
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

3665 S ORLANDO DR
SUITE 104
SANFORD, FL 32773

New Mailing Address:

FEI Number: 20-5762315 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LATRICE BILAL
3665 S ORLANDO DR
SUITE 104
SANFORD, FL 32773 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BILAL, LATRICE
Address: 3665 S ORLANDO DR SUITE 104
City-St-Zip: SANFORD, FL 32773 US

Title: TREA (X) Delete
Name: SINGLETON, ANGELA
Address: 1303 W 7TH ST
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LATRICE BILAL

PRES

01/21/2007

Electronic Signature of Signing Officer or Director

Date