

## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000109213

Entity Name: MIKELL'S AUTO SALES, INC.

FILED  
Aug 18, 2006  
Secretary of State

### Current Principal Place of Business:

2049 W HWY 44  
DELAND, FL 32720

### New Principal Place of Business:

2049 W HWY 44  
DELAND, FL 32720 US

### Current Mailing Address:

2049 W HWY 44  
DELAND, FL 32720

### New Mailing Address:

2049 W HWY 44  
DELAND, FL 32720 US

FEI Number: 20-3247153

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

### Name and Address of Current Registered Agent:

MIKELL, JAIME A  
545 N UMATILLA BLVD  
UMATILLA, FL 32784 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

### OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MIKELL, JAMES M  
Address: 2049 W HWY 44  
City-St-Zip: DELAND, FL 32720

Title: VD ( ) Delete  
Name: MIKELL, MASON J  
Address: 2049 W HWY 44  
City-St-Zip: DELAND, FL 32720

Title: SD (X) Delete  
Name: OLSON, TERRY E  
Address: 2049 W HWY 44  
City-St-Zip: DELAND, FL 32720

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MIKELL, JAMES M  
Address: 2049 W HWY 44  
City-St-Zip: DELAND, FL 32720 US

Title: VD (X) Change ( ) Addition  
Name: MIKELL, MASON J  
Address: 2049 W HWY 44  
City-St-Zip: DELAND, FL 32720 US

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: JAMES M MIKELL

PD

08/18/2006

Electronic Signature of Signing Officer or Director

Date