

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000002368

Entity Name: FIRST CHOICE DETAILING INC

FILED  
Jan 31, 2007  
Secretary of State

**Current Principal Place of Business:**

1824 N PINE AVE #200  
OCALA, FL 34475

**New Principal Place of Business:**

**Current Mailing Address:**

1824 N PINE AVE #200  
OCALA, FL 34475

**New Mailing Address:**

FEI Number: 20-4072694

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LEWIS, MICHAEL  
1824 N PINE AVE #200  
OCALA, FL 34475 US

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

LEWIS, MICHAEL E  
1824 N PINE AVE #200  
OCALA, FL 34475 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: MICHAEL E LEWIS

01/31/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P,T ( ) Delete  
Name: LEWIS, MICHAEL  
Address: 1824 N PINE AVE #200  
City-St-Zip: Ocala, FL 34475

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

Title: P,T (X) Change ( ) Addition  
Name: LEWIS, MICHAEL E  
Address: 1824 N PINE AVE #200  
City-St-Zip: Ocala, FL 34475

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: MICHAEL E LEWIS

P.

01/31/2007

Electronic Signature of Signing Officer or Director

Date