2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jan 11, 2008 8:00 am Secretary of State **DOCUMENT # P07000093229** 01-11-2008 90073 035 ***150 00 1. Entity Name CARSEARCH, INC. Mailing Address 40002120 Principal Place of Business 826 GARNET CIRCLE 826 GARNET CIRCLE WESTON, FL 33326 WESTON, FL 33326 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01032008 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For <u> 20-0748</u>2 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RODRY, JULES Street Address (P.O. Box Number is Not Acceptable) 826 GARNET CIRCLE WESTON, FL 33326 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, 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 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE RODRY, JULES NAME NAME STREET ADDRESS 826 GARNET CIRCLE STREET ADDRESS CITY-ST-ZIP WESTON, FL 33326 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE RODRY, TERESA B NAME NAME STREET ADDRESS STREET ADDRESS **826 GARNET CIRCLE** CITY-ST-ZIP WESTON, FL 33326 CITY-ST-7IP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP ☐ Delete TITLE ☐ Change Addition Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition 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 exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

SIGNATURE: