

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26229

Entity Name: M.G.P. AUTO SALES, INC.

FILED  
Jul 08, 2004  
Secretary of State

## Current Principal Place of Business:

619 SE 5TH AVE  
DELRAY BEACH, FL 33483 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1866  
DELRAY BEACH, FL 33447 US

## New Mailing Address:

619 SE 5TH AVE  
DELRAY BEACH, FL 33483 US

FEI Number: 22-2232715

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEWMAN, PETER  
619 SE 5TH AVE  
PO BOX 1866  
DELRAY BEACH, FL 33447 US

## Name and Address of New Registered Agent:

NEWMAN, PETER  
619 SE 5TH AVE  
DELRAY BEACH, FL 33483 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:

07/08/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VS ( ) Delete  
Name: NEWMAN, PETER,  
Address: 619 SE 5TH AVE.  
City-St-Zip: DELRAY BEACH, FL 33447

Title: PTD (X) Delete  
Name: NEWMAN, PHYLLIS  
Address: 619 SE 5TH AVE.  
City-St-Zip: DELRAY BEACH, FL 33447

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: NEWMAN, PETER  
Address: 619 SE 5TH AVE.  
City-St-Zip: DELRAY BEACH, FL 33447

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 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 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: PETER NEWMAN

PRES

07/08/2004

Electronic Signature of Signing Officer or Director

Date