2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000088631

Entity Name: LOUIS MOTOR NEWCO, INC.

FILED Apr 24, 2006 Secretary of State

| Current P | Principal Place | e of Business: | New Principal Plac | New Principal Place of Business: | |
|---|------------------------------------|---|---|--|--|
| | AST SUNRISE JDERDALE, F | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| | AST SUNRISE JDERDALE, F | | | | |
| FEI Number | : 65-0457561 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired (X) | |
| Name and Address of Current Registered Agent: | | | Name and Address | Name and Address of New Registered Agent: | |
| | CLAY AST SUNRISE JDERDALE, F | | | | |
| | e named entity e of Florida. | submits this statement for the p | ourpose of changing its registe | red office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| Electronic Signature of Registered Agent | | | ent | Date | |
| Election Ca | mpaign Financir | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHAN | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | KING, W. CLA 700-900 EAST |) Delete Y SUNRISE BLVD. RDALE, FL 33304 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | APPLEBY, ED 700-900 EAST |) Delete SUNRISE BLVD. RDALE, FL 33304 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | FRANCIS, KIR 700-900 EAST |) Delete K J SUNRISE BLVD. RDALE, FL 33304 | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: KIRK J. FRANCIS VTS 04/24/2006