## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 25, 2008 08:00 AN Secretary of State **DOCUMENT # P94000059780** LIVELY AUTOMOTIVE INC. Mailing Address Principal Place of Business 212 BUCKINGHAM PLACE 212 BUCKINGHAM PLACE BRANDON, FL 33511 BRANDON, FL 33511 01232008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3264119 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE LIVELY, CONRAD D. 212 BUCKINGHAM PLACE BRANDON, FL 33411 IN THIS SPACE 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. (NOTE: Registered Agent signeture required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. **PDST** TITLE LIVELY, CONRAD D MAME U00000922962 05/16/08-80011-019 150.00 212 BUCKINGHAM PLACE STREET ADDRESS CITY-ST-ZIP BRANDON, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 an address, with all other like empowered.

SIGNATURE:

BIGHATURE AND TYPED OR PRINTED NAME OF BIGHING OFFICER OR DIRECTOR

4-22-08 813-685-8796

Daytime Phone #

**FILED**