

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000090992

**FILED**  
**Mar 31, 2004**  
**Secretary of State**

**Entity Name:** THE ONLINE AUTO LOCATORS, INC.

**Current Principal Place of Business:**

2802 SYDNEY ROAD  
PLANT CITY, FL 33567

**New Principal Place of Business:**

**Current Mailing Address:**

2802 SYDNEY ROAD  
PLANT CITY, FL 33567

**New Mailing Address:**

PO BOX 2190  
BRANDON, FL 33509

**FEI Number:** 59-3437841

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURTON, STEVEN G  
100 N TAMPA ST  
SUITE 3500  
TAMPA, FL 33602 US

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

RASHID, SAM  
2802 SYDNEY RD  
PLANT CITY, FL 33566 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: SAM RASHID

03/31/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: RASHID, SAM  
Address: 3621 SUGARLOAF LANE  
City-St-Zip: VALRICO, FL

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

Title: DP (X) Change ( ) Addition  
Name: RASHID, SAM  
Address: 2802 SYDNEY RD  
City-St-Zip: PLANT CITY, FL 33566 US

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: SAM RASHID

PRES

03/31/2004

Electronic Signature of Signing Officer or Director

Date