2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Feb 12, 2004 08:00 AM Secretary of State **DOCUMENT # P97000075101** 1. Entity Name AUTÓ AMERICA, INC. Mailing Address Principal Place of Business 1945 SUNSET PT. ROAD 1945 SUNSET PT. ROAD CLEARWATER, FL 33765 CLEARWATER, FL 33765 01072004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3468054 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent GIANFILIPPO, JOHN DO NOT WRITE 1945 SUNSET PT RD. CLEARWATER, FL 33756 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 2-9-04 eature, 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, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. DITLE GIANFILLIPO, JOHN F NAME STREET ADDRESS 1945 SUNSET PT. ROAD CLEARWATER, FL 33765 CITY-ST-ZIP U0000048133 02/12/04-80068-004 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TIT! F NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify 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 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

727-224-9885