

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000051557

FILED
May 08, 2006
Secretary of State

Entity Name: NEW IMAGE AUTOMOTIVE GROUP, INC.

Current Principal Place of Business:

1354 S. KILLIAN DR.
#1
LAKE PARK, FL 33403

New Principal Place of Business:

Current Mailing Address:

2468 SW RIVIERA RD.
STUART, FL 34997

New Mailing Address:

FEI Number: 65-0846393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLECK, DOUGLAS H
2468 SW RIVIERA RD
STUART, FL 34997 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHARONE, MARK
Address: 17450 THUNDER RD
City-St-Zip: JUPITER, FL 33478

Title: D (X) Delete
Name: ARNOLD, MARK
Address: 945 INDIGO PT
City-St-Zip: GULFSTREAM, FL 33483

Title: PRES () Delete
Name: FLECK, DOUGLAS H PRES
Address: 2468 SW RIVIERA RD
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: DOUGLAS FLECK

PRES

05/08/2006

Electronic Signature of Signing Officer or Director

Date