2008 FOR PROFIT CORPORA ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Feb 29, 2008 08:00 AM Secretary of State **DOCUMENT # P98000075665** 1. Entity Name JENSEN BEACH AUTOMOTIVE, INC. Principal Place of Business Mailing Address 969 NE INDUSTRIAL BLVD. 969 NE INDUSTRIAL BLVD. JENSEN BEACH, FL 34957 JENSEN BEACH, FL 34957 CR2E034 (11/05) 01152008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 65-0860933 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RYAN, TIMOTHY P DO NOT WRITE 969 NE INDUSTRIAL BLVD. JENSEN BEACH, FL 34957 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE 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. n TITLE RYAN, TIMOTHY P MAME STREET ADDRESS 969 NE INDUSTRIAL BLVD. CITY-ST-ZIP JENSEN BEACH, FL 34957 TITLE NAME U00000843430 03/11/08-80068-021 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP MLE STREET ADDRESS CITY-ST-ZIP this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information into an organized and that my signature shall have the same legal effect as if made under ooth; that I am an officer or director wereally execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with