2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2005
Secretary of State

DOCUMENT# P98000091991

Entity Name: CAR CARE #1 INC.

Current Principal Place of Business:

4400 W. COLONIAL DR.
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

4400 W. COLONIAL DR.
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 59-3537683 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEWSOM, TONY PRES.
4400 W. COLONIAL DR.
ORLANDO, FL 32808 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: NEWSOM, TONY
Address: 2665 PHEASANT VILLAGE
City-St-Zip: DELAND, FL 32720

Title: VP/O ( ) Delete
Name: CAMPBELL, MARK
Address: 485 SPRINGWOOD CT
City-St-Zip: LONGWOOD, FL 32750

Title: S/O ( ) Delete
Name: NEWSOM, SALLY
Address: 2665 PHEASANT VILLAGE
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: NEWSOM, TONY
Address: 1900 HONTOON RD.
City-St-Zip: DELAND, FL 32720

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

Title: S/O (X) Change ( ) Addition
Name: NEWSOM, SALLY
Address: 1900 HONTOON RD.
City-St-Zip: DELAND, FL 32720

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: TONY NEWSOM D 02/23/2005

Electronic Signature of Signing Officer or Director — Date