


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
7 Aug 21, 2006 8:00 am
Secretary of State

07-14-2006 90027 014 ***150.00
08-21-2006 90005 008 ***400.00

DOCUMENT # P99000017503	
1. Entity Name L.A. CONCEPT CARS, INC.	

Principal Place of Business 6008 24TH STREET EAST BRADENTON, FL 34203	Mailing Address 6008 24TH STREET EAST BRADENTON, FL 34203
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50025789



02242006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0921653	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ROGERS, LARRY D 4367 INDEPENDENCE CT. SARASOTA, FL 34234	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVST ROGERS, LARRY D 4367 INDEPENDENCE CT. SARASOTA, FL 34234
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

Larry Rogers **LARRY ROGERS** 3/14/06 (941)358-0440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #