2008 FOR PROFIT CORPORATION

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| ANNUAL REPORT | | | | May 01, 2008 08:0 | | | |
|---|---|--------------------------------------|----------------------------|--|----------------------------|-----------------------------------|--|
| 1. Entity Nam | | | Secretary of St | | | | |
| SPECIR | UM AUTO BROKERS, INC. | | | , | | | |
| Principal Plac 218 JUPITER | STREET | Mailing Address PO BOX 7521 | | | | | |
| JUPITER, FL | 33458 | JUPITER, FL 33468 | | | | | |
| | | | | 03132008 | | (11/05) | |
| D | O NOT WRITE | CE | 4. FEI Numbe 65-0938 | er | Applied For Not Applicable | | |
| | | | 1 | | | \$8.75 Additional Fee Required | |
| WOLSKI (| 6. Name and Address of Current Re | gistered Agent | - | | NOT ME | r I milio ilima | |
| WOLSKI, GEORGE 218 JUPITER ST JUPITER, FL 33458 | | | | | NOT WR | | |
| | | | | IIN I | THIS SPA | ICE (| |
| | named entity submits this statement for thions of registered agent. | e purpose of changing its register | red office or registe | ered agent, or bot | h, in the State of Florid | a. I am familiar with, and accept | |
| SIGNATURE | Signature, typed or printed name of registered agent and | uite il applicable. (NOTE: Registero | ed Agent signature require | ed when reinstating) | · | DATE | |
| FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution. | | | | \$5.00 May Be U00000940524 05/28/08-80070-006 150.00 | | | |
| 10. | OFFICERS AND DI | RECTORS | - 15. | | * * | | |
| TITLE NAME | WOLSKI, GEORGE | | • | | • • • | | |
| STREET ADDRESS | 218 JUPITER ST | | | | | | |
| CITY-ST-ZIP | JUPITER, FL 33458 | | 4 | | | • | |
| TITLE NAME | | | | | | . ``\ | |
| STREET ADDRESS | | | | • • | | | |
| CITY-ST-ZIP | | | | • | | | |
| TITLE | | | | ; | , | | |
| NAME STREET ADDRESS | | | | · DO | NOT WE | \1 T F | |
| City-St-ZiP | | | <u>.</u> | DO NOT WRITE | | | |
| TITLE | | | | IN 7 | THIS SPA | \CE | |
| NAME STREET ADDRESS | | | | | | - | |
| CITY-ST-ZIP | | | | | | ·., · | |
| TITLE | | • | | | •: | • . | |
| NAME STREET ADDRESS | | | • | | y | | |
| CITY+ST-ZIP | | | | | | | |

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 attach ment with an address, with all other like empowered.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

The Wolskie V Les
THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-08