

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

AND FILED 1/2

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

06 FEB 22 PM 12:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # G52284

1. Corporation Name

The Auto Connection, Inc.

2. Principal Office Address

9006 SW 137 St.

3. Mailing Office Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Zip

33176

Country

Miami-Dade

Zip

Country

200067378682  
03/08/06--01008--016 \*\*2577.50

**REINSTATEMENT** 810-00

4. Date Incorporated or Qualified  
To Do Business in Florida

08/02/1 983

5. FEI Number

Applied For  
 Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Patricia Velasco

Street Address (P.O. Box Number is Not Acceptable)

1155 Brickell Bay Dr. Apt. 2502

Suite, Apt. #, Etc.

City

Miami,

State

FL

Zip Code

33131

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

Date 2-3-06

REGISTERED AGENT MUST SIGN

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
p/d	Alfonso Velasco	1155 Brickell Bay Dr. apt. 2502	Miami, FL 33131
vp/s	Patricia Velasco	1155 Brickell Bay Dr. apt 2502	Miami, FL 33131

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Patricia Velasco* Vice President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 3 / 2006  
Date

K. Eckel FEB 22 2006

Daytime Phone #

(786) 287-3242

2/2

February 17, 2006

Secretary of State

TO WHOM IT MAY CONCERN

This letter is to request that penalties be waived for the company

The Auto Connection inc bumbre G52284 said corporation was incorporated on August 2 1983

We were out of the country and did not receive the renewel notice

Any consideration will be appreciated

Sincerely

Alfonso and Patricia Velasco  
Sent wirelessly via BlackBerry from T-Mobile.

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