2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

May 10, 2007 8:00 am DOCUMENT # G74812 **Secretary of State** 1. Entity Namo 05-10-2007 90025 042 ***150.00 AFFORDABLE AUTO SALES, INC. Principal Place of Business Mailing Address 2500 HOLLYWOOD BLVD. 2500 HOLLYWOOD BLVD. HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) 4. FEI Number 59-2477833 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo JOESPH P KLAPHOLZ ESQ Street Address (P.O. Box Number is Not Acceptable) 2500 HOLLYWOOD BLVD. STE 212 HOLLYWOOD FL 33020 City Zip Code 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 r applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11111 HILL ☐ Change Delete ☐ Addition NEADEL, ROBERT NAMI 1925 PEMBROKE ROAD STREET ADDRESS STREET ADDRESS HOLLYWOOD FL CHY ST 76 CITY ST ZIP JHH ☐ Delete THEF ☐ Channe Addition MONA, NEAFEL NAMI SIRHIADDRISS Neadel, Mona 1925 PEMBROKE ROAD STREET ADDRESS 1925 Pembroke Road HOLLYWOOD FL 33020 Hollywood, Florida 33020 ☐ Change ☐ Delete TIDE ☐ Addition NAMI NAMI STREET ADDRESS STREET ADDRESS CHY-ST-742 CITY - ST- ZIP HHE Delete 1111 ☐ Change ■ Addition NAMI NAME STRIFT ADDRESS STREET ADDRESS CHY ST ZIP CHY SE-ZIP Delete 1000 TITLE Change Addition NAMI NAMI STREET ADDRESS STREET ADDRESS CITY-S1-7IP CITY - ST - 7(P TITLE ☐ Delete THU ☐ Change Addition NAME NAM

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; that I am an officer or director of the corporation or the receiver or further components in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CHY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND/TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MOWA NEADOZ

3/5/07

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