2007 FOR PROFIT CORPORATION

ANNUAL REPORT (AR) Apr 03, 2007 8:00 am Secretary of State DOCUMENT # K54618 1. Entity Name 04-03-2007 90015 016 ***150.00 VERO BEACH IMPORT AUTO SERVICE, INC. Principal Place of Business Mailing Address % KAREN SCOTT-FULCHINI % KAREN SCOTT-FULCHINI 2566 N US 1 VERO BEACH FL 32960 VERO BEACH FL 32960 3. Mailing Address 4412 5th Place S.W. 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State Vero Beach Applied For 4. FEI Number 65-0091771 Not Applicable 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 Name SCOTT-FULCHINI, KAREN 2566 N US 1 Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32960 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 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 HILL ☐ Change Addition Delete THEF FULCHINI, GERARDO NAME NAMÉ 2566 N US 1 STREET ADDRESS STREET ADDRESS VERO BEACH FL CITY ST-78P CITY ST 7IP ши Delete ☐ Change Addition SCOTT-FULCHINI, KAREN NAME NAMI 2566 N US 1 STREET ADDRESS STREET ADDRESS VERO BEACH FL CHY SI-ZIP CITY - S1-7IP TITLE Delete HILE Change Addition SCOTT, SYLVIA NAME NAMI 2566 N US 1 STREET ADDRESS STREET ADDRESS VERO BEACH FL CHY-ST-7IE CITY ST ZIP TITLE Delete Change Addition THILL NAME NAME STREET ADDRESS STREET ADDRESS CITY ST 7IP CITY ST-ZIP

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 logal effect as if made under eath; 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 arta-Ather like empowered.

CHY ST 7IP

ШЦ

NAM STREET ADDRESS

TITLE

NAMI STREET ADDRESS

CITY S1-7IP

☐ Delete

Delete

SIGNATURE:

HILL

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-78P

CITY ST-7IP HITH

Gerardo Fulchini 03/12/2007 (772)778-6991

☐ Change

☐ Change

Addition

Addition

FILED