

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S36670

Entity Name: AMBAR MOTORS INC.

FILED
Apr 20, 2004
Secretary of State

Current Principal Place of Business:

5379 NW 7 STREET
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

5379 NW 7 STREET
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 65-0253492

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARRERO, CARMEN
3250 SW 87 PLACE
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARRERO, CARMEN,
Address: 3250 SW 87TH PL
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: MARRERO, HECTOR JR,
Address: 3250 SW 87TH PL
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: SILVA, LOUIS
Address: 16691 SW 205 AVE
City-St-Zip: MIAMI, FL 33187

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUIS SILVA

D

04/20/2004

Electronic Signature of Signing Officer or Director

Date