

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

APPROVED  
AND  
FILED


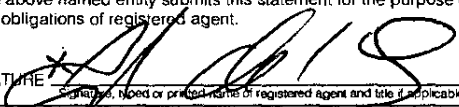
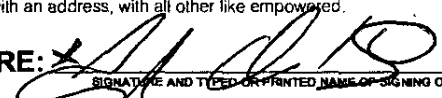
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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08/29/03--01013--025 \*\*\*61.25

**2003 AMENDED**

<b>DOCUMENT # 321362</b>			
1. Entity Name <b>Atlantic Automotive Paints, Inc.</b>			
<b>DO NOT WRITE IN THIS SPACE</b>			
2. Principal Place of Business <b>5200 NW 77th Court</b>		3. Mailing Address <b>Same</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>Miami, FL</b>		City & State	
Zip <b>33166</b>	Country <b>USA</b>	Zip	Country
4. FEI Number <b>59-1172729</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name <b>Gonzalo de la Uz</b>			
Street Address (P.O. Box Number is Not Acceptable) <b>2825 SW 105th Avenue</b>			
City <b>Miami</b>		FL	Zip Code <b>33165</b>
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 		Gonzalo de la Uz, President	
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Gonzalo de la Uz 2825 SW 105th Avenue, Miami, FL 33193	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President, Secretary, Treasurer Ada de la Uz 2825 SW 105th Avenue, Miami, FL 33193	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Gonzalo de la Uz, President X 8/8/03 305-500-9969	

CR2E034B (12/02)