

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 648042

FILED
Oct 20, 2004
Secretary of State

Entity Name: AUTOMOTIVE INTERSTATE DISTRIBUTORS, INC.

Current Principal Place of Business:

207 NE 20 ST.
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

207 NE 20 ST.
OCALA, FL 34470 US

New Mailing Address:

FEI Number: 59-2071143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOGAN, ROBERT T
10854 NE CITY HWY 314
SILVER SPRINGS, FL US

Name and Address of New Registered Agent:

HOGAN, ROBERT T
10854 NE CITY HWY 314
SILVER SPRINGS, FL 34488 US

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: ROBERT T. HOGAN

10/20/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VT () Delete
Name: HOGAN, ROBERT T
Address: 10854 NE CTY HWY 314
City-St-Zip: SILVER SPRGS, FL 00000,

Title: PS () Delete
Name: HOGAN, WENDY M,
Address: 10854 NE CITY HWY 314
City-St-Zip: SILVER SPRGS, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VT (X) Change () Addition
Name: HOGAN, ROBERT T
Address: 10854 NE CTY HWY 314
City-St-Zip: SILVER SPRGS, FL 34488 US

Title: PS (X) Change () Addition
Name: HOGAN, WENDY M
Address: 10854 NE CITY HWY 314
City-St-Zip: SILVER SPRGS, FL 34488 US

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: WENDY M. HOGAN

PS

10/20/2004

Electronic Signature of Signing Officer or Director

Date