## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F51754

FILED Sep 29, 2005 Secretary of State

| Entity Name: UNIVERSAL MOTORS OF MIAMI, INC.  |  |  |   |   |  |
|---|--|--|---|---|--|
| Current Principal Place of Business:  |  |  | New Principal Place o                         | New Principal Place of Business:          |  |
| 6573 SW 4<br>MIAMI, FL  |  |  | 6523 SW 47 STREET<br>MIAMI, FL 33142 US       | 3   |  |
| Current M   | ailing Addres  | s:   | New Mailing Address:                          | New Mailing Address:                      |  |
| 6573 SW 4<br>MIAMI, FL  |  |  | 6523 SW 47 STREET<br>MIAMI, FL 33142 US       |   |  |
| FEI Number:   | 59-2135215   | FEI Number Applied For ( )   | FEI Number Not Applicable ( )                 | Certificate of Status Desired ( )         |  |
| Name and Address of Current Registered Agent:   |  |  | Name and Address of                           | Name and Address of New Registered Agent: |  |
| DEL RIO, JOSE C 6523 SW 47 STREET MIAMI, FL 33155 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, |  |  |   |   |  |
| in the State  |  | admine and elaterness for the p  | arpose or origing ne registered               | omeo or regiotered agent, or bear,        |  |
| SIGNATUR  | RE: JOSE DE  |  |   |   |  |
| Election Can  | ce with s. 607.19  | ic Signature of Registered Age<br>3(2)(b), F.S., the corporation did no<br>g Trust Fund Contribution ( ).<br>TORS: | t receive the prior notice.                   | Date  S TO OFFICERS AND DIRECTORS:        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | PD ()<br>DEL RIO, JOSE<br>6523 SW 47TH<br>MIAMI, FL 331  | STREET   | Title: ( Name: Address: City-St-Zip:          | ) Change ()Addition                       |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | VSD ()<br>DEL RIO, ADRI<br>6523 SW 47TH<br>MIAMI, FL 331 | STREET   | Title: (<br>Name:<br>Address:<br>City-St-Zip: | ) Change ( ) Addition                     |  |
| Title:<br>Name:   | TD ( )<br>DEL RIO, MANI                                  | Delete<br>JEL J  | Title: (<br>Name:                             | ) Change ( ) Addition                     |  |

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.

Address:

City-St-Zip:

SIGNATURE: JOSE DEL RIO PD 09/29/2005

4016 NW 29TH STREET

MIAMI, FL 33142

Address:

City-St-Zip: