2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# F93000005399

Entity Name: MIAMI LAKES PONTIAC, INC.

Current Principal Place of Business:

6100 NORTHWEST 16TH STREET
MIAMI LAKES, FL 33014

New Principal Place of Business:

235 ALTARA AVENUE
CORAL GABLES, FL 33146

Current Mailing Address:

3050 BISCAYNE BLVD.
700W
MIAMI, FL 33137

New Mailing Address:

235 ALTARA AVENUE
CORAL GABLES, FL 33146

FEI Number: 65-0444763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HELLINGER, ANDREW B ESQ
3050 BISCAYNE BLVD.
700W
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

HELLINGER, ANDREW B ESQ
235 ALTARA AVENUE
CORAL GABLES, FL 33146 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: ANDREW HELLINGER 05/01/2008
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: D ( ) Delete
Name: LEE, BRIAN
Address: 11700 GREAT OAKS WAY
City-St-Zip: ALPHARETTA, GA 30022

Title: PD ( ) Delete
Name: JONES, STEVE
Address: 11700 GREAT OAKS WAY
City-St-Zip: ALPHARETTA, GA 30022

Title: D ( ) Delete
Name: SCHUSTER, VALERIE
Address: 100 RENAISSANCE CENTER
City-St-Zip: DETROIT, MI 48265

Title: ST ( ) Delete
Name: ALMONTE, NILSA
Address: 6100 NW 167 STREET
City-St-Zip: MIAMI LAKES, FL 33014

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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ANDREW HELLINGER,AUTHORIZED REPRESENTATIVE D 05/01/2008
Electronic Signature of Signing Officer or Director Date