2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K76220

City-St-Zip:

Entity Name: OCEAN AUTO CENTER INC

FILED Apr 24, 2009 Secretary of State

		OTO CENTER, INC.				
Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:		
9675 N.W. 12TH ST. MIAMI, FL 33172			9675 N.W. 12TH ST MIAMI, FL 33172			
Current Mailing Address:			New Maili	New Mailing Address:		
9675 N.W. 12TH ST. MIAMI, FL 33172			9675 N.W. 12TH ST MIAMI, FL 33172			
FEI Number	: 65-0106532	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired (X)	
Name and	Address of (Current Registered Agent:	Name and	Address of	f New Registered Agent:	
9675 N.W. MIAMI, FL The above	33172 US		urpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electro	nic Signature of Registered Ager	nt		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICER	S AND DIREC	TORS:	ADDITION	S/CHANGE	S TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	S (DEL COLLADO 9675 N.W. 12T MIAMI, FL 331	H ST	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D/P (GARCIA, SERA 9675 N.W. 12T MIAMI, FL 331	'H ST	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (GARCIA, KARI 9675 NW 12TH MIAMI, FL 331	l ST	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D GARCIA, JES 9675 NW 12 MIAMI, FL 3	TH ST	
Title: Name: Address:	() Delete	Title: Name: Address:	D GARCIA, MIO 9675 NW 12		

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.

City-St-Zip: MIAMI, FL 33172

SIGNATURE: ANTOLIN DEL COLLADO S 04/24/2009