2000 UNIFORM BUSINESS REPORT (UBR) FILED Jun 30, 2000 8:00 am Secretary of State **DOCUMENT # M08292** 1. Entity Name 06-30-2000 90002 014 ***150.00 M.G. MOTORS, INC. Mailing Address Principal Place of Business 10101 SW 42 ST. 10101 SW 42 ST. U0066987 MIAMI FL 33165-5042 MIAMI FL 33165 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2475712 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FLORIDA REGISTERED AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) ONE-CENTRUST-FINANCIAL CENTER, SUITE 3600 100 SE 2ND STREET MIAMI FL 33131 Zip Code City 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. ☐ Addition PD ☐ Change ☐ Delete TITLE **Y**ITLE GARRIDO, MARIO NAME NAME STREET ADDRESS STREET ADORESS 10101 SW 42 ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition ☐ Delete DTS TITLE TITLE NAME NAME GARRIDO, MAGDA STREET ADDRESS STREET ADDRESS 10101 SW 42 ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRÉSS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Detete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or or an attachment with an address, with all other like empowered.

SIGNATURE:

HAT DAE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/15/2000 305.935-9054

Attachment D# M08290 OUVLELGA87

MG MOTORS 3041 E. 10 AVE. HIALEAH, FL. 33013

June 26, 2000

Division Of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

To Whom It May Concern:

Attached is our 2000 annual registration and a check for the amount of \$150.00 we didn't receive our annual registration form on time the post office delivered it to another business. Now was when the other business brought it over to us. If you notice since we opened our business we have always filed our annual report on time please waive any penalties since it was not our fault that the report was not sent on time. Thank you for your attention.

Sincerely

. 71.1