DOCUMENT # M55204  1. Entity Name						FILED Jan 29, 2000 8:00 am					
AUTO H	ARBOR CORPORATION					Jar Se	ı 29, ecret	200 tarv	)0 8; of \$	:00 . Stat	am e
Principal Plac	e of Business	Mailing Address					01-29-200	•			
C/O MARK GILBERT 601 BRICKELL KEY DR MIAMI FL 33131		C/O MARK GILBERT 801 BRICKELL KEY DR #600 MIAMI FL 33131-2652				1 ( <b>5 5 5 5</b> 5 1 1	B: 01151 5()+9 1/	:8:: 88:): 8:8:	. 61211 61611 6	1 <b>4</b> 11 81811 <b>8</b> 18	ir Brêti 1881
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE						
City & State		City & State		•	4.	FEI Numbe	59-28	26494			plied For ot Applicable
Zip Country		Zip	Zip Coun		5.	Certificate o	of Status De	sired		<b>3.75</b> Add e Require	
	6. Name and Address of Current R	egistered Agent		<u> </u>	7.	Name and	Address of	New Regi			
CU. F	STOT HADI			Name	~~~	<del></del>	<del></del>		-~		
GILBERT, MARK 601 BRICKELL KEY DR #600				Street Address	s (P.O. E	Box Number	is Not Acce	ptable)			`.
	MI FL 33131			City	. •				FL	Zip Code	е
8. The above	named entity submits this statement for	the purpose of changing it	s register	ed office or regist	 tered ag	jent, or both	, in the State	e of Florida		<b>'</b>	· <del></del>
ŞIGNATURE .	Signature, typed or printed name of registered agent an	d tile if analisable (A)O	TC. De sistem	d Agent signature consis		a.matatia.a.\			DATE		
C This seems	<del></del>	<u> </u>		d Agent signature requi		emstating)			DAIE		
9. This corporation is eligible to satisfy its Intangible 1. Tax filing requirement and elects to do so. (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta					tion Campa t Fund Cont	-	cing		<b>0</b> May Be I to Fees
11.	OFFICERS AND D		12.	Ī	AC	DDITIONS/0	CHANGES T	O OFFICE		_	_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GILBERT, MARK 601 BRICKELL KEY DR #600 MIAMI FL 33131	☐ Delete		- 1					L	] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS HERNANDEZ, ANGEL 2828 CORAL WAY, PENTHOUSE MIAMI FL	☐ Defete		I .	·					] Change	☐ Addition
TITLE NAME	VP CHESNICK, ANDREW	☐ Delete	T/TU NAM	E						Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	2828 CORAL WY PH MIAMI FL 33145			-ST-ZIP							
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Delete								] Change	Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE	<u> </u>						] Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Delete	TITLI							] Change	☐ Addition
indicated of the cor	ertify that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee empower on an attachment with an address, with the contract of th	rue and accurate and that vered to execute this repor th all other like empewered	or the exe my signa t as requi	ture shall have the	e same	legal effect da Statutes	as if made u	under oath y name ap	; that I am pears in B	an officer lock 11 or	or director Block 12 if

305 533.2866

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

SIGNATURE: