2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002217

FILED Apr 13, 2004 Secretary of State

Entity Name: HIGHWAY SAFETY AND MOTOR VEHICLES ADVISORY COMMITTEE, INC.

Current Principal Place of Business: New Principal Place of Business:

DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES NEIL KIRKMAN BLDG / A-430

TALLAHASSEE, FL 32399

Current Mailing Address:

TALLAHASSEE, FL 32399

New Mailing Address:

DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES

NEIL KIRKMAN BLDG / A-430 TALLAHASSEE, FL 32399 DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES

DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES

NEIL KIRKMAN BLDG / B435 TALLAHASSEE, FL 32399

NEIL KIRKMAN BLDG / B435

FEI Number: 59-3203247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name a

Name and Address of New Registered Agent:

LAMBERT, SANDRA C

DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES

NEIL KIRKMAN BLDG / A-430 TALLAHASSEE, FL 32399 US DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES

NEIL KIRKMAN BLDG / B435 TALLAHASSEE, FL 32399 US

LAMBERT, SANDRA C

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: 04/13/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: STEIN, MICHAEL A Name: STEIN, MICHAEL A

Address: 901 PONCE DE LEON SUITE 700 Address: 200 SOUTH BISCAYNE BOULEVARD, #4450

City-St-Zip: MIAMI, FL 33134 City-St-Zip: MIAMI, FL 33131

Title: VP () Delete Title: () Change () Addition

 Name:
 BANGO, FRANK
 Name:

 Address:
 7500 NW 52ND STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:

Title: ST () Delete Title: () Change () Addition

 Name:
 BURGOS, MODESTO W
 Name:

 Address:
 2515 W FLAGLER STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33135
 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL A. STEIN P 04/13/2004