2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005732

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name
ADVANCE AUTOMOTIVE TECHNICIAN INTERNATIONAL ALLIANCE, INC

Principal Place of Business	Mailing Address
8355 SW 5 ST MIAMI, FL 33144	P.O. BOX 527262 MIAMI, FL 33152

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8355 SW 5 ST	P.O. BOX 527262
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33144 Country: DADE	Zip: 33152 Country: DADE

4. FEI Number: 65-0598507 ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LILY WAGNER 8355 SW 5 ST MIAMI, FL 33144	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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: Lily Wagner LILY WAGNER — DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT/DIRECTOR CHAIRMAN CARLOS VILLA 9452 SW 42ND LANE MIAMI, FLA 33152 ☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT/DIRECTOR ☐ Change ☒ Addition MANNY MARRERO 10505 SW 186 ST MIAMI, FLA 33157
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRES/DIRECTOR ☒ Delete LILY WAGNER 8355 SW 5 ST MIAMI, FLA 33144	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	VICE PRES/DIRECTOR ☐ Change ☒ Addition MANNY EXPOSITO 9 IW 29 ST MIAMI, FLA 33012
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRES ☒ Delete ENRIQUE BLANCO 987 SE 5 ST HIALEAH, FLA 33010	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY/DIRECTORS ☐ Change ☒ Addition JOSE GONZALEZ 5695 SW 8TH ST MIAMI, FLA 33134
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete 400003241744--2 -05/08/00--01010--011 *****61.25 *****61.25	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	TREASURE/DIRECTORS ☐ Change ☒ Addition CARLOS ALVAREZ 989 SW 67 AVE MIAMI, FLA 33144
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR ☐ Change ☒ Addition LILY WAGNER 8355 SW 5 ST MIAMI, FLA
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR ☐ Change ☒ Addition CARLOS VILLA 9452 SW 42ND LANE MIAMI, FLA 33152

12. I hereby certify that the information supplied with this filing 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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lily Wagner LILY WAGNER 4/19/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #