2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P0000002099

City-St-Zip:

MIAMI, FL 33147

Entity Name: AUTO FINANCE COMPANY, INC.

FILED Apr 25, 2003 Secretary of State

| Current Principal Place of Business: | | New Principal Plac | New Principal Place of Business: | |
|---|---------------------------------------|---|--|--|
| 3035 NW 65 STF MIAMI, FL 33147 | | | | |
| Current Mailing Address: | | New Mailing Addre | ss: | |
| PO BOX 471074 MIAMI, FL 33247 | | | | |
| FEI Number: 65-097 | 2253 FEI Number Applied For | () FEI Number Not Applicable () | Certificate of Status Desired (X) | |
| Name and Address of Current Registered Agent: | | ent: Name and Address | Name and Address of New Registered Agent: | |
| GLASS, THOMA 3035 NW 65 STF MIAMI, FL 33147 | REET | | | |
| The above name in the State of Flo | | or the purpose of changing its register | ed office or registered agent, or both, | |
| SIGNATURE: | | | | |
| | Electronic Signature of Register | red Agent | Date | |
| Election Campaign | Financing Trust Fund Contribution (|). | | |
| OFFICERS AND | DIRECTORS: | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| | ()Delete S, THOMAS NW 65 STREET | Title: Name: Address: | () Change () Addition | |

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

SIGNATURE: THOMAS GLASS PD 04/25/2003