

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 17, 2004 8:00 am
Secretary of State

05-17-2004 90015 017 ***150.00

DOCUMENT # P00000054377	
1. Entity Name Auto DEPOT WHOLESAKERS CORP	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1515 NW 7 Ave Suite, Apt. #, etc.	3. Mailing Address 1515 NW 7 Ave Suite, Apt. #, etc.
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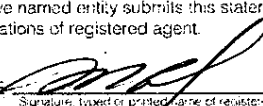
DO NOT WRITE IN THIS SPACE

City & State Miami, FL	City & State Miami, FL	4. FEI Number 65-1017289	Applied For No: Applicable
Zip 33136	Country USA	Zip 33136	Country USA
5. Certificate of Status Desired ☐		8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name RAUL I. RODRIGUEZ	
Street Address (P.O., Box Number is Not Acceptable)	
320 E 65 ST	
City Hialeah	FL Zip Code 33013

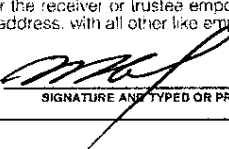
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE 	DATE
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	
9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees	

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PRESIDENT RAUL I. RODRIGUEZ 320 E 65 ST. Hialeah FL 33013	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	N/A	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	N/A	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	N/A	TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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IN THIS SPACE**

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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: 	RAUL I. RODRIGUEZ	Date 4-22-04	Daytime Phone #
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CR2E034B (12/02)