2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000083129

FILED Oct 13, 2004 Secretary of State

Entity Name: INTERCONTINENTAL AUTO BROKERS INC.

Current Principal Place of Business:			New Principal Place of Business:	
.O. BOX AMPA, F	14152 FL 33690			
urrent N	Mailing Addre	ss:	New Mailing Addre	ess:
.O. BOX AMPA, F	14152 FL 33690			
El Number	r: 59-3713433	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
	. MACDILL AV			
AMPA, F he above	FL 33690 U e named entity		purpose of changing its register	red office or registered agent, or both,
AMPA, F he above the Stat	FL 33690 U e named entity te of Florida.	submits this statement for the		red office or registered agent, or both,
AMPA, F he above the Stat	FL 33690 U e named entity te of Florida.			red office or registered agent, or both, Date
AMPA, F he above the Stat IGNATU accordar	e named entity te of Florida. IRE: Electro	submits this statement for the	gent	
AMPA, F he above the Stat IGNATU accordar lection Ca	e named entity te of Florida. IRE: Electro	submits this statement for the nic Signature of Registered Aga(2)(b), F.S., the corporation did r	gent not receive the prior notice.	
AMPA, F he above the Stat IGNATU accordar ection Ca	e named entity te of Florida. RE: Electro nce with s. 607.19 Impaign Financin	submits this statement for the nic Signature of Registered Age 3(2)(b), F.S., the corporation did r g Trust Fund Contribution (). CTORS:) Delete ROSS CDILL AVE	gent not receive the prior notice.	Date
accordar ection Ca FFICER le: ame: ldress:	e named entity te of Florida. IRE: Electro nce with s. 607.19 Impaign Financin IS AND DIREC D (SCOPELLITI, I 3217 A. S. MAI TAMPA, FL 33	submits this statement for the nic Signature of Registered Aga(2)(b), F.S., the corporation did rig Trust Fund Contribution (). CTORS:) Delete ROSS CDILL AVE 3690) Delete CDILL AVE	gent not receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR

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: JOHN VING D 10/13/2004