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20.0	3 UNIFORM BUS	INESS REPO	RT (UBR)	<u>) </u>		
DOCUM 1. Entity Nar		FILED				
Cosmos Aut	o Sales & Finance, Inc	03 FEB 28 AH II: 36				
466 W. SKD 434 P.O.Box: -5		Mailing Address P.O.Box: - 52174 Longwood, FL 327	752-1748	SECRETARY OF STATE FALLAHASSEE, FLORIDA		
Principal Place of Business Address Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number Applied For 59-3716055 Not Applicable		
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required-		
6.	Name and Address of Curren	t Registered Agent		7. Name and Address of New Registered Agent		
Shahrokh Sooudi 2208 Winslow Cir Casselberry, FL 32707 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.						
CICMATURE	•			;		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date						
	oration is eligible to satisfy its		/III FEE IS \$150.00	60000000000000		
_	Tax filing requirement and election (See criteria on back)	ts After MAY 1, 2 Make Check Paya	000 Fee will be \$5			
	·					
11.	OFFICERS AND D		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	President Shahrokh Sooudi	Delete	TITLE	ChangeAddition		
NAME STREET ADDRESS	2208 Winslow Cir		NAME STREET ADDRESS	000013696020		
CITY - ST - ZIP	Casselberry, FL 32707		CITY - ST - ZIP	03/07/0301062016 **300.00		
TITLE		Delete	TITLE	Change Addition		
NAME			NAME			
STREET ADDRESS	**************************************		CITY - ST - ZIP			
TITLE		Delete	TITLE	Change Addition		
NAME			NAME			
STREET ADDRESS			STREET ADDRESS	·		
CITY - ST - ZIP		Delete	CITY - ST - ZIP	Change Addition		
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY - ST - ZIP			CITY - \$T - ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE		. Delete	TITLE	ChangeAddition		
NAME STREET ADDRESS			NAME STREET ADDRESS			
CITY - ST - ZIP			CITY - ST - ZIP			
TITLE		Delete	TITLE	Change Addition		
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY - ST - ZIP	I trify that the information supplied with	h this filing does not qualify fo	CITY - ST - ZIP or the exemption st	Lated in Section 119.07(3)(i), Florida Statutes. I further certify that the		
13. 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 12 if shanged, or on an attachment with an address, with all other like empowered.						
SIGNATURE: President Feb/24/03						
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #						

AHachment #

Cosmos Auto Sales & Finance, Inc P.O.Box: - 521748 Longwood, FL 32752-1748

P0100004534

1/24/2003
Florida Departm

Florida Department of Revenue Division Of Corporations, U.B.R P.O.Box 1500 Tallahassee, FL 32303-1500

Re: - Letter no: - 103A00008780

Dear Sir or Madam:

As per our earlier correspondence we had requested your office to grant us permission to submit the annual fees of \$150.00 as the review of our records indicated that we were not in receipt of the annual corporate renewal from your office. Upon discussion with your office, and with there suggestion, we are enclosing the check for the amount of \$300.00, representing \$150.00 for the year 2002 and 2003.

Kindly accept our report and waive any penalties associated with such filing. Your uppermost attention to this matter is appreciated.

Sincerely,

Mr. Shahrokh Sooudi, President