2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 02, 2005 08:00 AM Secretary of State DOCUMENT # P01000094415 1. Entity Name ALMA'S AUTO, INC. Principal Place of Business Mailing Address 3510 NW 36 ST P.O. BOX 770231 MIAMI, FL 33142 MIAMI, FL 33177 No Chg-P CR2E034 (10/03) 04112005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1141000 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SAUL, ALBERTO L DO NOT WRITE 13961 SW 152 TERR MIAMI, FL 33177 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Added to Fees FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. П OFFICERS AND DIRECTORS 10. PD TITLE NAME SAUL, ALBERTO STREET ADDRESS 13961 SW 152 TERR CITY - ST - ZIP MIAMI, FL 33177 TITLE NAME U00000358149 05/04/05-80103-020 150.00 STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP 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 sport 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 of true the empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an indirect sample of the changed.

FILED

305-766-286-2800.

Daylime Phone #