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FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) ÁLED DOCUMENT # PO 10001 Péliable Automotive Sence, 3 03 0CT 30 AH 10: 35 SECRETARY OF STATE FALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business
145 N.E 21 Mailing Address 145 N.E DCS INC Suite, Apt. #, etc. Suite, Apt. #, etc. THAVENUE 7537 NW City & State . City & State FLORIDA MIAMI Not Applicable ~Country \$8.75 Additional 5. Certificate of Status Desired U.S.A 33150 Fee Required 7. Name and Address of Current Registered Agent Name 5 TANTAY SCOTT DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE City MIAM, 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 prigistered agent. SIGNATURE -January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. esiden+ TITLE IANTAN SCOTH NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TILE TITLE 500023403759 09/29/03--01086--013 ***8 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS DO NOT WRITE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP IN THIS SPACE TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME: NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 requirer of the corporation of the requirer of the requirement of the requirement

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SIGNATURE:

August 7, 2003

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: Document # P01000108640

Entity Name: Reliable Automotive Services, Inc.

FEI Number: 65-1154561

Principal Place of Business: 145 NE 21st Street Miami, Florida 33137

Dear Sir/Madam: -

-Since, I never received a notice that my 2002 and 2003 Uniform Business Report was due, I would like to request a relief from the delinquent filing fee that is now due. I have enclosed the annual fee of \$150.00 per year for 2002 and 2003 and an additional \$8.75 for a certificate of status.

Sincerely,

Stanton Scott