2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P02000022069 1. Entity Name DEALER AUTO EXCHANGE, INC.							FILE 1) 2006 DEC -4 PM 3: 07			
Principal Plac	e of Busines	·e		ailing Address						
1	1885 S.W. 4TH AVE. E-1			1885 S.W. 4TH AVE.				SECRETARY OF STATE TALLAHASSEE.FLORIDA		
			_	E-1 Delray Beach, Fl 33444				TALLAHASSEEN		
DELRAY BEACH, FL 33444		·	DEERAT BEACH, TE 33444				I NO PURDI HU DOMA HEN DOMA DOMA DOMA DOMA DINO MANA HOMA DOMA REMIDIRA HAMA			
2. Principal Place of Business			3.	3. Mailing Address			·			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				12012006 Chg-P CR2E034 (11/05)			
City & Stat	te			City & State				4. FEI Number Applied For 03-0392759 Not Applicate		
Zip		Country		Zip	Соиг	ntry		5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name	and Address of Curre	nt Regis	stered Agent		ļ		7. Name and Address of New Registered Agent		
SHULMAN	J DEDNA	DD.				Name	JA	AMES ARNOTT		
1865 SW 4		NO.				Street Ac	dress ((P.O. Box Number is Not Acceptable)		
D-5A DELRAY E	BEACH. F	L 33444					15 NW 17TH COURT			
	· · · · · · · · · · · · · ·			0				RAY BEACH FL Zip Cod 144		
8. The above named entity submits this stagement 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 of printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
Amended AR is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
10.	VPST	OFFIÇERS AN	ID DIRE		11.		1000	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME	[N, BERNARD		Delete	TITL		77	ST Change Addition Addition		
STREET ADDRESS	· ·				EET ADDRESS	JAMES ARNOTT 15 NW 17TH COURT				
CITY-ST-ZIP						r-ST-ZIP	De	ELRAY BEACH, FL 33444		
TITLE NAME	P PINDER, WILLIAM W			☐ Delete	E IE	P	LLIAM W PINDER			
STREET ADDRESS	700 NE 7					EET ADDRESS		ONE 70 ST		
CITY-ST-ZIP	BOCA RA	ATON, FL 33487			CITY	/-ST-ZIP	Bo	CA RATON, FL 33487		
TITLE NAME				☐ Defete	TITL: NAM			☐ Change ☐ Additi		
STREET ADDRESS						EET ADDRESS		000082264740 12/04/0601063009 **61.25		
CITY-ST-ZIP	<u> </u>				CITY	/-ST-ZIP		12/94/9591963998 **61.25		
TITLE NAME				☐ Delete	TITL	I		Change Addition		
STREET ADDRESS						EET ADDRESS				
CITY-ST-ZIP	ļ <u>.</u>				CITY	r-\$T-ZIP				
TITLE NAME				☐ Defete	TSTL: NAM			☐ Change ☐ Additi		
STREET ADDRESS						EET ADDRESS				
CITY-ST-ZIP						/-ST-ZIP				
NAME					TITU			☐ Change ☐ Addition		
STREET ADDRESS	s					EET ADDRESS				
CITY-ST-ZIP	<u> </u>			Max						
indicated of the cor	-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other-like empowered.									
SIGNATURE: William W Linder William W. PINDER 12/1/06 561-703-6946 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Day Day Day Day Day Day Day										

12/500