

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000025363					
1. Entity Name CAR DEALS, INC.					
Principal Place of Business 4710 NW 72 AVE MIAMI, FL 33166			Mailing Address 14800 SW 168 ST MIAMI, FL 33187		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 36-4528217	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FERNANDEZ, JOYCE M 14800 SW 168 ST MIAMI, FL 33187			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City State 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:					
(NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD FERNANDEZ, JOYCE M 4700 N.W. 72 AVE MIAMI, FL 33166		TITLE NAME STREET ADDRESS CITY-ST-ZIP	REINSTATEMENT 06-07	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP		700098566607 04/26/07--01007--016 ***300.00		
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12. 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:					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR					
Date Daytime Phone #					

FILED
07 APR 13 AM 11:46
CLERK OF THE STATE
TALLAHASSEE, FLORIDA

