2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2004
Secretary of State

DOCUMENT# P02000095176

Entity Name: AVM AUTOMOTIVE PAINT SUPPLIES, INC.

Current Principal Place of Business:

1302 NE 123 STREET
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

1302 NE 123 STREET
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: 81-0568673 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MATIAS, ALFREDO SR
720 NW 132 STREET
NORTH MIAMI, FL 33168

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MATIAS, ALFREDO SR
Address: 720 NW 132 STREET
City-St-Zip: NORTH MIAMI, FL 33168

Title: SD ( ) Delete
Name: MATIAS, ANA M
Address: 720 NW 132 STREET
City-St-Zip: NORTH MIAMI, FL 33168

Title: VD ( ) Delete
Name: MATIAS, ALFREDO JR
Address: 1655 NE 115 STREET #3B
City-St-Zip: MIAMI, FL 33181

Title: TD ( ) Delete
Name: KAUFMAN, VIRNA
Address: 1655 NE 115 STREET #3B
City-St-Zip: MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALFREDO MATIAS OWNE 03/18/2004

Electronic Signature of Signing Officer or Director — Date