2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095182

Entity Name: RM AUTOMOTIVE, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11320 SW 184 STREET MIAMI, FL 33157

Current Mailing Address: New Mailing Address:

11320 SW 184 STREET MIAMI, FL 33157

FEI Number: 35-2180929 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORERA, RAFAEL 11630 SW 168 STREET MIAMI, FL 33157 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MORERA, RAFAEL
Address: 11620 SW 169 STREET

Address: 11630 SW 168 STREET City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: MORERA, ROBERTO M

Address: 11630 S.W. 168 STREET City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: MORERA, RAFAEL M JR

Address: 13454 SW 136 TR
City-St-Zip: MIAMI, FL 33186

Title: PD (X) Change () Addition

Name: MORERA, RAFAEL
Address: 11630 SW 168 STREET
City-St-Zip: MIAMI, FL 33157

Title: VPD (X) Change () Addition

 Name:
 MORERA, ROBERTO M

 Address:
 11630 S.W. 168 STREET

 City-St-Zip:
 MIAMI, FL 33157

Title: SD (X) Change () Addition

 Name:
 MORERA, RAFAEL M JR

 Address:
 13454 SW 136 TR

 City-St-Zip:
 MIAMI, FL 33186

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: RAFAEL MORERA PD 04/29/2005