

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000096731

FILED  
Oct 20, 2004  
Secretary of State

Entity Name: AUTO IMAGE MOTORCARS, INC.

## Current Principal Place of Business:

17649 SAN CARLOS BLVD  
FT MYERS BEACH, FL 33931

## New Principal Place of Business:

## Current Mailing Address:

17649 SAN CARLOS BLVD  
FT MYERS BEACH, FL 33931

## New Mailing Address:

FEI Number: 11-3650588

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BASS, GARY H  
1401-B LEE STREET  
FT MYERS, FL 33901 US

## 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LUSSIER, DAN  
Address: 17649 SAN CARLOS BLVD  
City-St-Zip: FT MYERS, FL 33931

Title: VD ( ) Delete  
Name: LUSSIER, DORTHEA  
Address: 17649 SAN CARLOS BLVD  
City-St-Zip: FT MYERS BEACH, FL 33931

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TR ( ) Change (X) Addition  
Name: LUTHER, ERIC C  
Address: 17649 SAN CARLOS BLVD  
City-St-Zip: FORT MYERS BEACH, FL 33931

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: DOROTHEA J LUSSIER

VD

10/20/2004

Electronic Signature of Signing Officer or Director

Date