


2005 FOR PROFIT CORPORATION REINSTATEMENT

1 of 2

DOCUMENT # P03000004099		
1. Entity Name BPC AUTO SALES INC		

FILED
05 APR 22 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 8004 NW 154TH STREET SUITE 388 MIAMI LAKES, FL 33016 US	Mailing Address 8004 NW 154TH STREET SUITE 388 MIAMI LAKES, FL 33016 US
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2. Principal Place of Business 15919 NW 49 th AVE - Bldg 16 Suite, Apt. #, etc.	3. Mailing Address 15919 NW 49 th AVE - Bldg 16 Suite, Apt. #, etc.
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City & State HIALEAH FL	City & State HIALEAH FL
Zip 33014	Country USA

6. Name and Address of Current Registered Agent COLE, BASIL L 8004 NW 154TH STREET SUITE 388 MIAMI LAKES, FL 33016		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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) DATE _____

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COLE, BASIL L 8004 NW 154TH ST #388 MIAMI LAKES, FL 33016 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700054210487 05/10/05--01053--001 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COLE, PATRICIA C 8004 NW 154TH STREET, #388 MIAMI LAKES, FL 33016 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Basil L. Cole 4/9/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2092

BPC AUTO SALES INC
15919 NW 49TH AVE – BLDG. 16
HIALEAH FL 33014
Tel.(305)621-0900
Fax. (305)621-2800

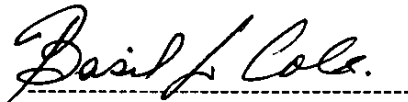
Florida Department of State

To Whom It May Concern:

Please be advised that we never received the letter you sent us on May 3, 2004, also , please correct your record to reflect the proper mailing address.

Thank you for your anticipated corporation.

Sincerely,

A handwritten signature in cursive script that reads "Basil Cole." The signature is written in dark ink and is positioned above a horizontal dashed line.

Basil Cole -President