## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 12, 2004 8:00 am Secretary of State

DOCUMENT # P03000015924  1. Entity Name  WD AUTO SALES, INC.					04-12-2004 90648 017 ***150.00	
	DO NOT WR			ACE	54031434	
	Place of Business West 40th Street	3. Mailing 1326	Address West 40th	Street		
Suite, Apt.	#, etc.	Suite,	Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
	eah Florida	City & Hia]	City & State Hialeah Florida		4. FEI Number 30-0153160 Applied For Not Applied be	
<sup>Zip</sup> 3301	Country U.S	.A. Zip 3	33012	Country U.S.A	A. 5. Certificate of Status Desired	
	DO NOT	WRITE	**	Name Street Addr	7. Name and Address of Current Registered Agent ALBERTO DIEGUEZ  dress (P.O. Box Number is Not Acceptable)	
	IN THIS	<b>SPACE</b>			1326 West 40th Street	
			ū.	City	Hialeah FL Z33012	
Tax filling r	Signature, typed or printed name of registe oration is eligible to satisfy its Intrequirement and elects to do so, ria on back)	angible	January 1 - May After May 1, Amended I e Check Payable	ngstered Agent signature of 71 Fee is \$150.00 Fee is \$550.00 UBR is \$61.25 to Department of	10. Election Campaign Financing \$5.00 May Be Added to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DP DIEGUEZ, ALBERT 1326 West 40 St Hialeah F1 3301 DVP DIEGUEZ, HECTOR 1326 West 40 St Hialeah F1 3301	reet 2 A.		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE		
STRLET ADDRESS CITY-ST-ZIP				NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE	
1+TLE NAME STREET AODRESS CITY-ST-ZIP				TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP T				TITLE NAME SIREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY: SI-ZIP	pertify that the inference or and	od vijbyd 485	7	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ed in Section 119.07(3)(i) Florida Statutes ( buther reutity that the information	

noticed very use the moreauon supring supring thing 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 poor 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 trustep empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address. 4/9/2004 (305) 633-9425 ALBERTO I. DIEGUEZ, PRESIDENT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR