2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000044403

Name:

Address:

City-St-Zip:

FILED May 07, 2009 Secretary of State

Entity Name: BROWARD FOREIGN AUTO SALES, INC. **Current Principal Place of Business: New Principal Place of Business:** 3233 NE 3RD AVENUE OAKLAND PARK, FL 33334 US **Current Mailing Address: New Mailing Address:** P.O. BOX 590561 FT LAUDERDALE, FL 33359 US FEI Number: 68-0549651 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: MITCHENER, ALVIN C 3233 NE 3RD AVENUE OAKLAND PARK, FL 33334 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MITCHENER, ALVIN C Name: Name: 6678 CONCH COURT Address: Address: BOYNTON BEACH, FL 33437 US City-St-Zip: City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: GRANT, EUGENE Name: 12597 NW 10TH PLACE Address: Address: SUNRISE, FL 33323 US City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition WALLACE, VERONICA Name: Name: 6678 CONCH COURT Address: Address: City-St-Zip: BOYNTON BEACH, FL 33437 US City-St-Zip: Title: () Delete Title: () Change () Addition CHANG, CARLENE Name: Name: Address: 5235 SW 10TH COURT Address: City-St-Zip: City-St-Zip: MARGATE, FL 33068 US Title: Title: () Delete () Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: ALVIN C MITCHENER 05/07/2009

MITCHENER, ANDREW D

BOYNTON BEACH, FL 33437 US

6678 CONCH COURT