

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000049463

FILED
Oct 22, 2004
Secretary of State

Entity Name: DEALER PROMOTIONS, INC.

Current Principal Place of Business:

P.O. BOX 1422
FORT LAUDERDALE, FL 33302

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1422
FORT LAUDERDALE, FL 33302

New Mailing Address:

FEI Number: 56-2355303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RMS PARTNERS, INC.
2319 N. ANDREWS AVENUE
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

HAFT STEINLAUF & CO
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: DANIEL STEINLAUF

10/22/2004

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: ASTLEFORD, BRAD
Address: P.O. BOX 1422
City-St-Zip: FORT LAUDERDALE, FL 33302

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD () Change (X) Addition
Name: KAUFFMAN, MICHAEL
Address: 322 E CENTRAL BLVD (# 1211)
City-St-Zip: ORLANDO, FL 32801

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: BRAD ASTLEFORD

PD

10/22/2004

Electronic Signature of Signing Officer or Director

Date