2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000123690

Name:

Address:

City-St-Zip:

DIAZ, LUIS A

4480 SW 4TH ST

CORAL GABLES, FL 33134 US

Entity Name: METROPOLIS AUTO SALES, INC

FILED Feb 21, 2005 Secretary of State

Littly Nai	HE. WILTROP	OLIS AUTO SALLS, INC			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
3609 NW 4 MIAMI, FL			6601 NW 32 AVENUE MIAMI, FL 33142 US		
Current M	ailing Addres	ss:	New Mailing Address:	New Mailing Address:	
3609 NW 4 MIAMI, FL			6601 NW 32 AVENUE MIAMI, FL 33142 US		
FEI Number:	20-0353664	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address of N	Name and Address of New Registered Agent:	
PBA FINANCIAL SERVICES, CORP 13935 NW 1ST AVE MIAMI, FL 33168 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: MAURICIO BARRAGAN					
	Electror	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BARRAGAN, M 4480 SW 4TH		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	CRISTANCHO, 4480 SW 4TH		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title:	S (X) Delete	Title: () Change ()Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MAURICIO BARRAGAN P 02/21/2005