

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000131977

Entity Name: MIAMI AUTO CARE, INC.

FILED
Oct 15, 2007
Secretary of State**Current Principal Place of Business:**8498 SW 40 ST
MIAMI, FL 33155 US**New Principal Place of Business:****Current Mailing Address:**8498 SW 40 ST
MIAMI, FL 33155 US**New Mailing Address:**

FEI Number: 84-1628257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:ALVAREZ, DAVID
8498 SW 40 ST
MIAMI, FL 33155 US**Name and Address of New Registered Agent:**

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:Title: P () Delete
Name: ALVAREZ, DAVID M
Address: 8498 SW 40 ST
City-St-Zip: MIAMI, FL 33155 USTitle: VP () Delete
Name: JIMENEZ, DOMINGO A
Address: 11340 SW 41 TERR.
City-St-Zip: MIAMI, FL 33165 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: VP (X) Change () Addition
Name: BOTIFOLL, FRANK C
Address: 8498 SW 40 ST
City-St-Zip: MIAMI, FL 33155 US

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.

SIGNATURE: DAVID ALVAREZ

P

10/15/2007

Electronic Signature of Signing Officer or Director

Date