2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000019698

Entity Name: INDIANAPOLIS ALITO SALES CORP

5920 80TH STREET, N #402

ST. PETERSBURG, FL 33709

Address: City-St-Zip: FILED Oct 30, 2009 Secretary of State

Littly Nai	IIC. INDIANA	FOLIS AUTO SALLS, COR	Γ.		
Current P	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
	IE HWY. EAS [.]) BEACH, FL	•			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	IE HWY. EAS [.]) BEACH, FL	•			
FEI Number:	20-0665593	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
621 NW 39 POMPANO	S, GUSTAVO OTH STREET O BEACH, FL				
	named entity: of Florida.	submits this statement for tr	ne purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE: ABRANT	ES, GUSTAVO			
	Electror	nic Signature of Registered	Agent	Date	
		3(2)(b), F.S., the corporation did g Trust Fund Contribution ().	d not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	RONCHI, GEAR 4221 NE 11 TE		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ABRANTES, GI 621 NW 39 ST		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VSD ()) Delete DRGINA M	Title: Name:	() Change () 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.

Address:

City-St-Zip:

SIGNATURE: RONCHI, GEAN PRES 10/30/2009