

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000109007

**Entity Name:** GTO AUTOCARE INC.

**FILED**  
**Nov 10, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

10920 NE 6TH AVE  
MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

10920 NE 6TH AVE  
MIAMI, FL 33161

**New Mailing Address:**

**FEI Number:** 73-1714446

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PENA, GUILLERMO  
10920 NE 6TH AVE  
MIAMI, FL 33161 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:** GUILLERMO PENA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** PENA, GUILLERMO  
**Address:** 10920 NE 6TH AVE  
**City-St-Zip:** MIAMI, FL 33161

I hereby 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 all other like empowered.

**SIGNATURE:** GUILLERMO PENA

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DP

11/10/2010

\_\_\_\_\_  
Date