

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000145824

Entity Name: NIKIN MOTORS, INC.

FILED
Oct 07, 2005
Secretary of State

Current Principal Place of Business:

9701 NW 7TH AVENUE
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

17801 NW 2ND AVENUE
SUITE 217A
MIAMI, FL 33169

New Mailing Address:

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

Name and Address of Current Registered Agent:

OWANIKIN, JOSEPH A
17801 NW 2ND AVENUE
SUITE 217A
MIAMI, FL 33169 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: OWANIKIN JOSEPH A.

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: P () Delete
Name: OWANIKIN, JOSEPH A
Address: 17801 NW 2ND AVENUE SUITE 217A
City-St-Zip: MIAMI, FL 33169

Title: VP () Delete
Name: VALMIR, GRACIUSSE
Address: 17801 NW 2ND AVENUE SUITE 217A
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: BAYORO, APPOLINAIRE
Address: 8450 NW 169TH TERRACE
City-St-Zip: MIAMI, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OWANIKIN, ROBERT A
Address: 17801 NW 2ND AVENUE SUITE 217A
City-St-Zip: MIAMI, FL 33169

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

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

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: OWANIKIN ROBERT A.

P

10/07/2005

Electronic Signature of Signing Officer or Director

Date