

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000109176

FILED  
Nov 05, 2009  
Secretary of State

Entity Name: AUTO SERVICES INTERNATIONAL CORP.

## Current Principal Place of Business:

9440 NW 13TH STREET  
DORAL, FL 33172

## New Principal Place of Business:

9326 NW 13TH STREET  
BAY # 14  
DORAL, FL 33172

## Current Mailing Address:

9440 NW 13TH STREET  
DORAL, FL 33172

## New Mailing Address:

9326 NW 13TH STREET  
BAY # 14  
DORAL, FL 33172

FEI Number: 90-0245965

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

FROILAN, MEDINA O VP  
9551 NW FOUNTAINBLEAU BLVD  
APT 211  
MAIMI, FL 33172 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: FROILAN MEDINA

11/05/2009

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: PD ( ) Delete  
Name: VASQUEZ, GINA V  
Address: 9551 FONTAINEBLEAU BLVD. APT 211  
City-St-Zip: MIAMI, FL 33172

Title: VP ( ) Delete  
Name: MEDINA, FROILAN O  
Address: 9440 NW 13TH STREET  
City-St-Zip: DORAL, FL 33172

Title: S ( ) Delete  
Name: VASQUEZ, JOSEPH S  
Address: 9551 FONTAINEBLEAU BLVD. APT 211  
City-St-Zip: MIAMI, FL 33172

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: FROILAN MEDINA

VP

11/05/2009

Electronic Signature of Signing Officer or Director

Date