## May 11, 2007 8:00 am Secretary of State 2007 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # P05000118143** 05-11-2007 90033 028 \*\*\*158.75 DOUGLAS FORD, INC. Principal Place of Business Mailing Address 251 S DIXIE HWY 5800 NORTHWEST 74TH AVENUE MIAMI, FL 33133 MIAMI, FL 33166 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04292007 Cha-P CR2E034 (12/06) City & State -City & State 4 FEI Number Applied For 25-1925924 Not Applicable Zio Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DIAZ, JUAN ESQ 5800 NORTHWEST 74TH AVENUE Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33166 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE ☐ Change ☐ Addition BARED, JOSE P NAME NAME 5800 NORTHWEST 74TH AVENUE STREET ADDRESS STREET ADDRESS MIAMI, FL 33166 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME DIAZ, JUAN NAME STREET ADDRESS 5800 NORTHWEST 74TH AVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166 CITY-ST-ZIP TITLE President ☐ Delete TITLE ☐ Change **Addition** Richard HERMANIEZ NAME STREET ADDRESS 251 S. Dirie Hwy STREET ADDRESS CITY-ST-ZIP MiAni, FL 33133 CITY-ST-ZIP Seey/Treusurer FITLE ☐ Defete TITLE Change **Addition** Michael Aguilene 251 3 Diric Huy NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Cozul Guller, FC 33 133 CITY-ST-ZIP Dioechoe ☐ Delete TITLE ☐ Change ☐ Addition Jose A. Brand NAME NAME 5200 LW 744 Ave Mani, FC 35166 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: \_\_\_\_\_\_ D. Ap. 23, 2007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylimo Phone #