2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000119925

Entity Name: TROPICAL MOTORS AUTO SALES, INC.

FILED Nov 16, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2714 NW 69TH AVE 3240 NE 2ND AVENUE SOUTH BAY OAKLAND PARK, FL 33034 US

Current Mailing Address: New Mailing Address:

2714 NW 69TH AVE 3240 NE 2ND AVENUE SOUTH BAY OAKLAND PARK, FL 33334 US

FEI Number: 20-3377474 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DASILVA, CICERO H
2714 NW 69TH AVE
MARGATE, FL 33063
US
VIEIRA, CATIA
3740 INVERRARY DR. #2Q
LAUDERHILL, FL 33319
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: CATIA VIEIRA 11/16/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 DASILVA, CICERO H
 Name:
 DASILVA, ADIEL H

 Address:
 2714 NW 69TH AVE
 Address:
 2714 NW 69TH AVE

 City-St-Zip:
 MARGATE, FL 33063 US
 City-St-Zip:
 MARGATE, FL 33063 US

Title: VP () Delete Title: () Change () Addition
Name: DASIL VA ALYSSON Name:

 Name:
 DASILVA, ALYSSON
 Name:

 Address:
 2714 NW 69TH AVE
 Address:

 City-St-Zip:
 MARGATE, FL 33063 US
 City-St-Zip:

Title: S () Delete Title: T (X) Change () Addition

Name: DASILVA, FERNANDINA Name: VIEIRA, CATIA

 Address:
 2714 NW 69TH AVE
 Address:
 3740 INVERRARY DR. #2Q

 City-St-Zip:
 MARGATE, FL 33063 US
 City-St-Zip:
 LAUDERHILL, FL 33319 US

Title: T (X) Delete Title: () Change () Addition

 Name:
 DASILVA, ADIÉL
 Name:

 Address:
 2714 NW 69TH AVE
 Address:

 City-St-Zip:
 MARGATE, FL 33063 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CATIA VIEIRA T 11/16/2006