

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000140975

Entity Name: AUTOMART OF FLORIDA INC

FILED
Dec 23, 2007
Secretary of State

Current Principal Place of Business:

2013 SE 16 CT
POMPANO BEACH, FL 33062

New Principal Place of Business:

905 NE 3RD AVE
FT LAUDERDALE, FL 33304

Current Mailing Address:

2013 SE 16 CT
POMPANO BEACH, FL 33062

New Mailing Address:

3180 NW 107 TH AVE
CORAL SPRINGS, FL 33065

FEI Number: 20-3646899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHORT, FRAN
2013 SE 16 CT
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

SHORT, FRAN
3180 NW 107TH AVE
CORAL SPRINGS, FL 33065 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: FRANCES SHORT

12/23/2007

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: SHORT, FRAN
Address: 2013 SE 16 CT
City-St-Zip: POMPAN0 BEACH, FL 33062

Title: S () Delete
Name: KNOX, APRIL
Address: 11896 NW 78 PLACE
City-St-Zip: OAKLAND PARK, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHORT, FRAN
Address: 3180 NW 107TH AVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: S (X) Change () Addition
Name: KNOX, APRIL
Address: 11896 NW 78 PLACE
City-St-Zip: PARKLAND, FL 33076

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: APRIL KNOX

OFFI

12/23/2007

Electronic Signature of Signing Officer or Director

Date