

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000156273

Entity Name: GROUPCAR.COM, INC.

FILED  
Feb 01, 2007  
Secretary of State

## Current Principal Place of Business:

6870 N AUGUSTA DR  
MIAMI, FL 33015

## New Principal Place of Business:

19621 E OAKMONT DR  
MIAMI, FL 33015 US

## Current Mailing Address:

6870 N AUGUSTA DR  
MIAMI, FL 33015

## New Mailing Address:

19621 E OAKMONT DR  
MIAMI, FL 33015 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMARAN & SHEFER, P.A.  
2999 NE 191 ST  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

COLACIOS, ANDRES PD  
19621 E OAKMONT DR  
MIAMI, FL 33015 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: ANDRES COLACIOS

02/01/2007

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: PD ( ) Delete  
Name: COLACIOS, ANDRES  
Address: 6870 N AUGUSTA DR  
City-St-Zip: MIAMI, FL 33015

Title: SD (X) Delete  
Name: MONTALBAN, ALEJANDRO  
Address: 6870 N AUGUSTA DR  
City-St-Zip: MIAMI, FL 33015

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: COLACIOS, ANDRES PD  
Address: 19621 E OAKMONT DR  
City-St-Zip: MIAMI, FL 33015 US

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 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: ANDRES COLACIOS

PD

02/01/2007

Electronic Signature of Signing Officer or Director

Date