2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000072577

LAKEWOOD, CO 80228 US

Apr 21, 2009 Secretary of State

Entity Name: AUTOS AHEAD INC **Current Principal Place of Business: New Principal Place of Business:** 4779 SABLE PINE CIRCLE WEST PALM BEACH, FL 33417 **New Mailing Address: Current Mailing Address:** 320 WRIGHT ST, UNIT 102 4900 OMAR STREET LAKEWOOD, CÓ 80228 FREMONT, CA 94538 FEI Number: 31-1840403 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: SMITH, JOSHUA B SMITH, JEREMY B 4849 SABLE PINE CIRCLE 4849 SABLE PINE CIRCLE WEST PALM BEACH, FL 33417 US WEST PALM BEACH, FL 33417 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: JEREMY B. SMITH 04/21/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: () Change () Addition SMITH, JACK E Name: Name: 2108 BONNIE PL Address: Address: City-St-Zip: AUGUSTA, GA 30906 City-St-Zip: Title: PCEO Title: (X) Change () Addition () Delete PCEO Name: SMITH, JOSHUA B Name: SMITH, JOSHUA B 320 WRIGHT STREET, #102 4900 OMAR STREET Address: Address: LAKEWOOD, CO 80228 US FREMONT, CA 94538 US City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: VΡ () Delete VΡ SMITH, ERICA M SMITH, ERICA M Name: Name: 320 WRIGHT STREET, #102 4900 OMAR STREET Address: 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.

City-St-Zip:

FREMONT, CA 94538 US

VΡ SIGNATURE: ERICA M. SMITH 04/21/2009