2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102705

Entity Name: REGINAL AUTO SALES, INC

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4701 SW 45TH STREET DAVIE, FL 33314

Current Mailing Address: New Mailing Address:

142 NW 94TH STREET
MIAMI, FL 33150

4701 SW 45TH STREET
DAVIE, FL 33314

FEI Number: 26-1090500 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:

REMONVIL, REGINAL
142 NW 94TH STREET
MIAMI, FL 33150 US

REMONVIL, REGINAL
4701 SW 45TH STREET
DAVIE, FL 33314 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: REMONVIL REGINAL 04/17/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: REMONVIL, REGINAL Name: REMONVIL, REGINAL

 Name:
 REMONVIL, REGINAL
 Name:
 REMONVIL, REGINAL

 Address:
 142 NW 94TH STREET
 Address:
 4701 SW 45TH STREET

 City-St-Zip:
 MIAMI, FL 33150
 City-St-Zip:
 DAVIE, FL 33314

Title: VP () Delete Title: () Change () Addition

 Name:
 CHARLES, JONAS P
 Name:

 Address:
 7653 NW 2ND CT.
 Address:

 City-St-Zip:
 MIAMI, FL 33150
 City-St-Zip:

Title: V () Delete Title: () Change () Addition

 Name:
 FLEURY, JEAN H
 Name:

 Address:
 4701 SW 45TH STREET
 Address:

 City-St-Zip:
 DAVIE, FL 33314
 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.

SIGNATURE: REMONVIL REGINAL PRES 04/17/2009