FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jun 25, 2001 8:00 am **DOCUMENT # Secretary of State** 1. Entity Name 930 000 22 889 06-05-2001 90031 043 ***158.75 Motortech. Automotive Services Inc. Principal Place of Business 2313 S State Road 7. Mailing Address Hollywood \$1 33023. 8512 2. Principal Place of Business 2313 5 State Road 7 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State
Helywood City & State Applied For 65-0406 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Broward. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ... -1050-1229uov 2451 NW 195 Ave. Peruhoke Pines 7 33029 Street Address (P.O. Box Number is Not Acceptable) Zip Code 8. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 4: Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE President -Delete TITLE Addition NAME NAME 5050 Riquer. STREET ADDRESS STREET ADDRESS 245T NWIGT AND P. Pines 33029. City-St-7P CITY-ST-ZIP TITLE Vice president. TITLE Change ☐ Addition NAME Mantha Rigner. 2457 NW 125 Au P. Pows 33029 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME-STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition MANUF NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information sopplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver of fusite empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P930000 26.8899 otortech Automotive Services. The 12313 S State Poud 7 Same Holywood Pl 33023 2. Principal Place of Business 2313 S State Poud 7 3. Mailing Address Suite, Apl, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Giry & State wood City & State 4. FEI Number Applied For 930000 Not Applicable Enoward \$8.75 Additional Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Jose Riquer 2451 NW 195 Ave Street Address (P.O. Box Number is Not Acceptable) pembroke Pines 7 33029 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its re-distered office or registered agent, or both, in the State of Fforida. 5 grature, typest or printed name of registered agent and title if applicable (NOTE: Filigistored Agent aigneture required when reinstring) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and alocts to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 DILE 小esident ☐ Delete TITLE ☐ Change Sose Riquer. NAME HAME STREET ADDRESS 2451 NW 195 Ave Permboke P. STREET ADDRESS CUTY-SI-ZIP CITY-ST-ZIP Vice president MILE TITLE Change Addition 2451 NW 195 AMP P. Pines VALUE NAME STREET ADDRESS STREET ADDRESS 33029 CITY-ST-ZIP CHD-ST-ZP HILE ☐ Delate TITLE ☐ Change ☐ Addition HAME STREET ADDRESS STREET ACCRESS C:TY-ST-ZIP CITY-ST-ZIP Delete TIRE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C:TY - ST- 719 tin F Delete TITLE ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change Addition HARAF MANG STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP 13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental feport is true and accurate and that my signature shall have the same legal effect as if made under eath; that I are an officer or director of the corporation or the receiver or funder empowered to execute this report as a quired by Chapter 607. Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607. es . (Martha Rigo

6/5/01-90031/-043-\$158.75-\$158.75