2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 29, 2004 08:00 AM Secretary of State DOCUMENT # P93000063727 1. Entity Name PRESTIGE AUTO SALES, INC. Principal Place of Business Mailing Address 885 E. 49TH STREET 885 E. 49TH STREET HIALEAH, FL 33013 HIALEAH, FL 33013 CR2E034 (10/03) 04272004 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0438385 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALFONSO, WENCESLAO F DO NOT WRITE 885 E. 49TH STREET HIALEAH, FL 33013 IN THIS SPACE 5. 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. I am familiar with, and accept the obligations of registered agent. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE U00000138463 194/29/04-80082-005 150.00 NAME WENCELAO, ALFONSO F 885 E. 49TH STREET STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33013 HILE NAME ALFONSO, MAYQUEL 885 E. 49TH STREET STREET ADDRESS HIALEAH, FL 33013 CITY-ST-ZIP TUTLE ALFONSO, ELIA NAME STREET ADDRESS 885 E 49ST DO NOT WRITE CITY-ST-ZIP HIALEAH, FL 33013 IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes 1 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 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 in Block 10 or Block 11 if with all other like empowered.

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

JRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED