

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000030104

Entity Name: VENICE MOTOR CARS, INC.

FILED  
Oct 05, 2005  
Secretary of State

## Current Principal Place of Business:

1018 US 41 BYPASS S  
VENICE, FL 34285 US

## New Principal Place of Business:

## Current Mailing Address:

1018 US 41 BYPASS S  
VENICE, FL 34285 US

## New Mailing Address:

FEI Number: 65-0574512

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACOB, TIM L  
1018 US HWY 41 BYPASS S.  
VENICE, FL 34285 US

## Name and Address of New Registered Agent:

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: TIM JACOB

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: P ( ) Delete  
Name: JACOB, TIM L  
Address: 1279 THOREAU CIRCLE  
City-St-Zip: VENICE, FL 34292

Title: V ( ) Delete  
Name: JACOB, RYAN  
Address: 1279 THOREAU CIRCLE  
City-St-Zip: VENICE, FL 34292

Title: D ( ) Delete  
Name: LAROCCO, DAVID P  
Address: 10 DEL PRADO DR  
City-St-Zip: ENGLEWOOD, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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 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: TIM JACOB

P

10/05/2005

Electronic Signature of Signing Officer or Director

Date