2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000078851

HERRERA, IVAN F

1320 HOMESTEAD BLVD

HOMESTEAD, FL 33030 US

Name: Address:

City-St-Zip:

FILED May 01, 2009 Secretary of State

Entity Name: DISCOVERY AUTO SALES, INC. **Current Principal Place of Business: New Principal Place of Business:** 1320 HOMESTEAD BLVD HOMESTEAD, FL 33030 US **Current Mailing Address: New Mailing Address:** 13005 SW 196TH ST MIAMI, FL 33177 FEI Number: 65-0616533 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: TAVAREZ, ELBA TAVAREZ, FAUSTO 13005 SW 196 STREET 13005 SW 196 STREET MIAMI, FL 33177 MIAMI, FL 33177 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: FAUSTO J TAVAREZ 05/01/2009 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition TAVAREZ, FAUSTO J Name: Name: 13005 SW 196 STREET Address: Address: City-St-Zip: MIAMI, FL 33177 US City-St-Zip: Title: VΡ (X) Delete Title: () Change () Addition Name: TAVAREZ, ELBA Name: 13005 SW 196 ST Address: Address: MIAMI, FL 33177 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition ALMONTE, SHAILIS Name: Name: 1320 HOMESTEAD BLVD Address: Address: City-St-Zip: HOMESTEAD, FL 33030 US City-St-Zip: Title: (X) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: FAUSTO J TAVAREZ 05/01/2009