SIGNATURE: _

2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P97000088877 1. Entity Name VEHICLES TO GO, INC.					Feb 25, 2000 8:00 am Secretary of State 02-25-2000 90025 040 ***150.00			
Principal Place	e of Business	Mailing Address						
9605 NW 79 AVE BAY 26 HIALEAH GARDENS FL 33016 US		10109 S.W. 22ND TERRACE MIAMI FL 33165-7462						
	ace of Business .W.3/AVE	3. Mailing Address						
Suite, Apt.		Suite, Apt. #, etc.			DO N	OT WRITE IN TH		
City & State		City & State		4. F	El Number 65-(787533		oplied For
Zip 3300	Country BROWARA	Zip	Country	أسوقه ووجريس	ertificate of Status [\$8.75 Add Fee Require	
	6. Name and Address of Curren	t Registered Agent	Name		ame and Address		ed Agent	
4165	DES, CLAUDIA P S.W. 151 TERRACE AMAR FL 33027		City	ddress (P.O. Bo	N VALDE	BLVA 7	# 101 FL Zip Cod	de
8. The above	named entity submits this statement f	or the purpose of changing its	<u>`N</u>	legistered age			ندور <u></u> ا ا	<u>125</u>
SIGNATURE .	NELSON VALA Signature, typed or printed name of registered agen		TE: Registered Agent signatu	re required who r	nstating)		15/00	
Tax filing n	oration is eligible to satisfy its Intangible equirement and elects to do so.	1	'!!! FEE IS \$150.0 000 Fee will be \$5 ble to Department	50.00	10. Election Cam Trust Fund Co)0 iviay d to Fees
11.	OFFICERS AND	DIRECTORS	12.	ADI	DITIONS/CHANGES	S TO OFFICERS		IS IN 11
TITLE	P	☐ Delete	TITLE NAME				Change	Ľ'
NAME STREET ADDRESS CITY-ST-ZIP	PONCE, LAZARO I 10109 S.W. 22ND TERRACE MIAMI FL 33165		STREET ADDRESS CITY-ST-ŹIP			_		
TITLE	T	☐ Delete	TITLE			-	Change	□.
NAME STREET ADDRESS CITY-ST-ZIP	PONCE, AILEEN C 10109 S.W. 22ND TERRACE		NAME STREET ADDRESS CITY-ST-ZIP					
TITLE	MIAMI FL 33165 S	Delete	TITLE		The second secon	The same of the sa	Change	
NAME STREET ADDRESS	VALDES, CLAUDIA P		NAME STREET ADDRESS	2011 R	ENAISSAML	e Blub #	·101	
CITY-ST-ZIP	4165 SW 151 TERR MIRAMAR FL 33027		CITY-ST-ZIP	MIR	AMAR FL	33021	<u> </u>	
TITLE	VP	☐ Delete	TITLE		•		🔀 Change	
NAME STREET ADDRESS	VALDES, NELSON 4165 SW 151 TERR		NAME STREET ADDRESS	ונסבה	REVALSS!	ance Blu	D#101	
CITY-ST-ZIP	MIRAMAR FL 33027		CITY-ST-ZIP		Revalssi IRAMAR,	FL 37	71.5	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		☐ Change	□.
TITLE - NAME STREET ADDRESS CITY-ST-ZIP	· ·	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	□.
	certify that the information supplied wi on this report or supplemental report poration or the receiver or trusted em	th this fling does not qualify fi is true and accurate and that bowered to execute for repor	or the exemption sta my signature shall he t as required by Cha	ted in Section 1 ave the same le opter 607, Florid	19.07(3)(i), Florida egal effect as if mad la Statutes; and tha	Statutes. I furthe de under oath; th t my name appe	r certify that the lat I am an office ars in Block 11 o	r or Historia

1/5/00 (305) 401-57 90