2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 03, 2006 8:00 am Secretary of State **DOCUMENT # P970001011116** 04-03-2006 90412 026 ***150.00 1. Entity Name AUCTIONS ON WHEELS, INC. Principal Place of Business Mailing Address 2801 EVANS STREET 2801 EVANS STREET 50008675 HOLLYWOOD, FL 33020-1119 HOLLYWOOD, FL 33020-1119 2. Principal Place of Business 3. Mailing Address 2080 C Tracktai DEOC 01302006 CR2E034 (11/05) City & State City & State 4. FEI Number Applied For Dania anı 65-0813842 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STAMPLER, HARRY P Street Address (P.O. Box Number is Not Acceptable) 2801 EVANS STREET HOLLYWOOD, FL 33020-1119 CilyDania Zip Code 8. The above named entity sub rpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of perisia (NOTE: Registered Agent signatur Stampler 3.27.06 SIGNATURE agent and title if applicable 9. Election Campaign Financing \$5.00 мау Ве FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Delete Change ☐ Addition STAMPLER, HARRY P NAME NAME 2080C Tigertail Blud STREET ADDRESS 2801 EVANS STREET STREET ADDRESS FZ 33004 CITY - ST - ZIP HOLLYWOOD, FL 330201119 CITY-ST-ZIP Dania Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-S1-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP □ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP to be solved that the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information in deccyrate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if I hereby certify that the information supplied w indicated on this report or supplemental report this filia of the corporation or the receiver or tru Stampler 3.27. au 954.921.8888 SIGNATURE

NAME OF SIGNING OFFICER OR DIRECT

FILED