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2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State
05-03-2004 91037 033 ***150.00

DOCUMENT # P98000069159

1. Entity Name
DANDI AUTO SALES, INC.

Principal Place of Business	Mailing Address
3602 S ORANGE AVENUE ORLANDO, FL 32806 US	3602 S. ORANGE AVENUE ORLANDO, FL 32806 US

04302004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
5475 S OBT	5475 S. OBT
Suite, Apt #, etc.	Suite, Apt #, etc.
City & State: ORLANDO FL	City & State: ORLANDO FL
Zip: 32839 Country: US	Zip: 32839 Country: US

4. FEI Number: 59-3529649 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CASTILLO, NICOLAS A.
DANDI AUTO SALES INC.
3602 S. ORANGE AVENUE
ORLANDO, FL 32806

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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.

SIGNATURE________________________

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

Title	Name	Street Address	City-St-Zip	
P	CASTILLO, NICOLAS A.	143 WEST CEDARWOOD CIRCLE	KISSIMMEE, FL 34743	☐ Delete
VP	AYBAR, MATILDE	143 WEST CEDARWOOD CIR	KISSIMMEE, FL 34743	☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title	Name	Street Address	City-St-Zip	
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition

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. I 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 changed, or on an attachment with all other like empowered.

SIGNATURE: [signature] NICOLAS A. CASTILLO 4/30/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — TELE. 407 7098609 Daytime Phone #