P990000091

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10/02/06--01029--012 **35.00

DIVISION OF CORPORATIONS

10/2/00°

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Government Cars Distribution Center, Inc. (Name of Corporation)
DOCUMENT NUMBER: P99000000891
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Shiomi Presser, Esquire
(Name of Contact Person)
Law Offices of Shlomi Presser, P.A. (Firm/Company)
200 SE 6th Street, Suite 602 (Address)
Fort Lauderdale, FL 33301 (City/State and Zip Code)
For further information concerning this matter, please call:
Shlomi Presserat (954) 764-1080 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organiz		
in order to change its registered office or register		
1. The name of the corporation: Government Cars Distribu	dion Center, Inc.	
2. The principal office address: 592 MAYFAIR DR. SOUT	H, BROOKLYN NY 11234	2006 OCT
3. The mailing address (if different):		DT -2
4. Date of incorporation/qualification: 01/05/1999	Document number: P99000000891	三
5. The name and street address of the current registered ag Florida Department of State:	ent and registered office on file with the	MM11: 05
UZI ARGAMAN		
8020 NW 7TH AVE		
MIAMI FL 33150		
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered office	
UZI ARGAMAN		
8315 RODEO DRIVE		
(P.O. Box NOT acceptable) LAKE WORTH FL. 33467		
The street address of its registered office and the street as changed will be identical.	address of the business office of its registered	i agent,
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been no		
(Suppose of professor or director)	UZI ARGAMAN - Director (Printed or typed name and title)	
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all state of my duties, and I am familiar with and accept the oblideoument is being filed merely to reflect a change in the corporation has been notified in writing of this change.	ganon of my position as registerea agent. O e registered office address, I hereby confirm	ormance ir, if this that the
	9/28/2006	
(Signature of Registered Agent) If signifying on behalf of an entity:	(Date)	
UZI ARGAMAN (Typed or Printed Name)		s
-		

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)