2003 FOR PROFIT CORPORATION

SIGNATURE:

	003 FOR PROF			FILED Jun 09, 2003 8:00 am	0399683
DOCU	MENT # P9900	00060567	1/2/200	Secretary of State	₽
1. Entity Nan AUTO LE				06-09-2003 90121 008 ***558.75	
	ce of Business i*BLVD: CIRCLE: NW I FL 33431	Mailing Address 2816 BANYAN BLVD CIRCLE BOCA RATON FL 33431	: NW		_
2. Principal F 3601 Suite, Apt.	Place of Business N. Dixie HWAY #, etc.,	3. Mailing Address 3601 N Dixi6 Suite, Apt. #, etc.	HWAY	CHECK HERE IF MAKING CHANGES	
Suite City & Stat	<u> </u>	Suite #	15	A FELNIUM A	٦
Boco	Raton FL	BOCA Rate	N, FL	32-21014/4 Not Applicable	<u></u>
^{Zip} 334	31 USA	15425	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent	7
BERNAL, LORENZO 2816 BANYAN BLVD CIRCLE NW BOCA RATON FL 33431			. Name Street Address	(P.O. Box Number is Not Acceptable)	
воса ка	IUN FL 33431		City	□ Zip Code	-
	against a patitude property this attachment for	os the suppose of changing its a		FL Zip Code ered agent, or both, in the State of Florida. I am familiar with, and accept	_
the obligate	tions of registered agent. Signature, typed or printed name or registered ageny	and title if applicable. (NOTE: 1	o Berval	5-30-03 ed when reinstating) DATE	
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of		The second s	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP?	P PINEDA, CARLOS 21218 ST ANDREWS BL BOCA RATON FL 33433	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	101)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BERNAL, LORENZO 2816 BANYAN BLVD CIRCLE NV BOCA RATON FL 33431	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	CR2E03
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DOOM INTON 12 WHO!	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	-
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition	
indicated of the cor	l on this report or supplemental report is	s true and accurate and that my owered to execute this report as	signature shall have the	Section 119.07(3)(i), Florida Statutes, I further certify that the information a same legal effect as if made under oath; that I am an officer or director 17, Florida Statutes; and that my name appears in Block 10 or Block 11 if	1