2008 FOR PROFIT CORPORATION ANNUAL REPORTS

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DI

Jan 11, 2008 08:00 Al Secretary of State DOCUMENT #V69504 1. Entity Name RICHARD DANVERS AUTOMOTIVE, INC. Principal Place of Business Mailing Address 2514 SW 30 AVE 2514 SW 30 AVE PEMBROKE PK, FL 33009 PEMBROKE PK, FL 33009 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 01062008 Chg-P City & State City & State 4. FEI Number Applied For 65-0359223 Not Applicable Ζíρ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DANVERS, KIMBERLY L. Street Address (P.O. Box Number is Not Acceptable) 18550 NW 84TH CT. MIAMI, FL 33015 Zip Code FL 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. DATE Signature, typed or cylintest game of registered epent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE !S \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition ☐ Delete TATLE Change TITLE DANVERS, RICHARD F., JR. NAME NAME STREET ADDRESS 18550 NW 84TH CT. .U00000781222 15708-80025-STREET ADDRESS CITY-ST-7IP MIAMI, FL CITY-ST-ZIP -016 158 ☐ Addition TALE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ■ Addition TITLE Change THIF Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-718 ☐ Addition TITLE Delete TITLE Change NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 true 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 a direction of the corporation of the corporation of the corporation or the receiver or true 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 a direction of the corporation of the corporation

Richard Danvers 12/21/07

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