

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000105972

**FILED**  
**Nov 06, 2007**  
**Secretary of State**

**Entity Name:** A1A AUTO COLLISION CORP.

**Current Principal Place of Business:**

3251 N.W. 30 STREET  
MIAMI, FL 33142

**New Principal Place of Business:**

3251 N.W. 30 STREET  
MIAMI, FL 33142 US

**Current Mailing Address:**

3251 N.W. 30 STREET  
MIAMI, FL 33142

**New Mailing Address:**

**FEI Number:** 73-1680392      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PAZ, JOSE L  
413 NW 32 PLACE  
MIAMI, FL 33125 US

**Name and Address of New Registered Agent:**

PAZ, JOSE L  
4230 NW 204 STREET  
MIAMI, FL 33055 US

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.

SIGNATURE: JOSE L PAZ

11/06/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: PAZ, JOSE L  
Address: 413 NW 32 PLACE  
City-St-Zip: MIAMI, FL 33125

Title: DV ( ) Delete  
Name: MENA, ANABELKIS  
Address: 413 NW 32 PLACE  
City-St-Zip: MIAMI, FL 33125

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: PAZ, JOSE L  
Address: 4230 NW 204 STREET  
City-St-Zip: MIAMI, FL 33055

Title: DV (X) Change ( ) Addition  
Name: MENA, ANABELKIS  
Address: 4230 NW 204 STREET  
City-St-Zip: MIAMI, FL 33055

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE L PAZ

P

11/06/2007

Electronic Signature of Signing Officer or Director

Date