

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF MOTOR VEHICLES
Neil Kirkman Building - Tallahassee, 32399-0500
MOTOR VEHICLE DEALER TITLE REASSIGNMENT SUPPLEMENT
(Instructions on Reverse Side)

For use by licensed MOTOR VEHICLE DEALERS, AUCTION DEALERS and THEIR BUYERS ONLY

This reassignment is supplement to: ☒ Title No.: **97853435** State of Issue: **FLORIDA**

☐ Manufacturer's Statement or Certificate of Origin

VEHICLE DESCRIPTION

Vehicle Identification Number C34842	Year 1990	Make TRAIL MOB	Model	Body TL
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REASSIGNMENT INFORMATION

Name of Selling Dealer (Print) TRANSPORT FUNDING LLC		Dealer License Number		State of License	
Street Address 434 IOWA WOODS CIR E		City ORLANDO		State FL	Zip Code 32828
Sales Tax Collected \$	Sales Tax Reg. No. (Sales Tax Information is not required on dealer to dealer transactions)				
Buyer's Name(s) CESAR OSORIO					Date of Sale 10/01/07
Buyer's Address LA ESPERANZA INTIBUCA		City HONDURAS C.A.		State	Zip Code
Auction Name (If applicable)		Auction License Number		State of License	
Street Address		City		State	Zip Code

ODOMETER DISCLOSURE STATEMENT

WARNING: FEDERAL AND STATE LAW REQUIRE THAT YOU STATE THE ODOMETER MILEAGE IN CONNECTION WITH TRANSFER OF OWNERSHIP. FAILURE TO COMPLETE OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINES AND/OR IMPRISONMENT.

I STATE THAT THIS MOTOR VEHICLE'S ☐ 5 DIGIT OR ☐ 6 DIGIT ODOMETER NOW READS ☒ (NO TENTHS) MILES, DATE READ / / AND TO THE BEST OF MY KNOWLEDGE THAT IT REFLECTS THE ACTUAL MILEAGE OF THE VEHICLE DESCRIBED IN THIS DOCUMENT UNLESS ONE OF THE FOLLOWING IS CHECKED:

CAUTION:
READ CAREFULLY
BEFORE YOU
CHECK A BOX

- ☐ 1. I HEREBY CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, THE ODOMETER READING REFLECTS THE AMOUNT OF MILEAGE IN EXCESS OF ITS MECHANICAL LIMITS
- ☐ 2. I HEREBY CERTIFY THAT THE ODOMETER READING IS NOT THE ACTUAL MILEAGE
WARNING - ODOMETER DISCREPANCY

**SELLER AFFIRMS, UNDER PENALTY OF PERJURY THAT THE ABOVE
FACTS ARE TRUE AND CORRECT TO THE BEST OF HIS/HER KNOWLEDGE**

Dealer's Agent Printed Name (Selling Dealer)		Dealer's Agent Signature	
Buyer's Signature (1) Acknowledges Receipt of Statement		Buyer's Signature (2) Acknowledges Receipt of Statement	
Buyer's Printed Name (1) First, Full Middle or Maiden, Last		Buyer's Printed Name (2) First, Full Middle or Maiden, Last	
Street Address	City	State	Zip Code

NOTICE: ANY ALTERATION OR ERASURE MAY VOID THIS ASSIGNMENT AND ALL ASSIGNMENTS THAT FOLLOW.

FILE: - ORIGINAL: WITH TITLE
HSMV 82994 (REV. 01/02) S

COPY: DEALER RECORD