

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000109247

FILED
Jun 26, 2008
Secretary of State**Entity Name:** MOTOREX PLUS INC**Current Principal Place of Business:**147 NE 21 ST.
MIAMI, FL 33137**New Principal Place of Business:****Current Mailing Address:**147 NE 21 ST.
MIAMI, FL 33137**New Mailing Address:****FEI Number:** 20-3272734**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GELABERT, ORESTE
147 NE 21 ST.
MIAMI, FL 33137 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:**

Title: PD () Delete
Name: ORESTE, GELABERT
Address: 210-71ST ST., SUITE 311
City-St-Zip: MIAMI BCH, FL 33141

Title: VTD () Delete
Name: CANALE, LETICIA N
Address: 210-71ST ST., SUITE 311
City-St-Zip: MIAMI BCH, FL 33141

Title: S () Delete
Name: GELABERT, NICOLAS
Address: 210-71ST ST., SUITE 311
City-St-Zip: MIAMI BCH, FL 33141

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: ALVAREZ, DANIEL O
Address: 16191 SW 15TH PL
City-St-Zip: DAVIE, FL 33326

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: GELABERT ORESTE

PD

06/26/2008

Electronic Signature of Signing Officer or Director_____
Date