2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 158513

CHECKER CAB OPERATORS INC.

FILED Apr 21, 2008 Secretary of State

Entity Name: CHECKER CAB OPERATORS, INC.					
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
3111 NW 2 MIAMI, FL	27TH AVENUE 33142 US				
Current M	ailing Addres	s:	New Mailing Address:	New Mailing Address:	
P.O. BOX 4 MIAMI, FL			3111 NW 27TH AVE. MIAMI, FL 33242 US		
FEI Number:	65-0186398	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
HERNANDEZ, CANDIDO 3111 NW 27 AVE MIAMI, FL 33186 US			HERNANDEZ, CANDIDO 3111 NW 27 AVE MIAMI, FL 33142 US		
	named entity s of Florida.	submits this statement for the p	urpose of changing its registered o	office or registered agent, or both,	
SIGNATURE:				04/21/2008	
	Electron	ic Signature of Registered Age	nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () HERNANDEZ, C 3111 NW 27TH MIAMI, FL		Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	V () LOPEZ, ORLAN 3111 NW 27TH MIAMI, FL 3314	AVENUE	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	S () HERNANDEZ, G	Delete GLBERTO	Title: () Name:) Change ()Addition	

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.

Address:

City-St-Zip:

SIGNATURE: GILBERTO HERNANDEZ S 04/21/2008

3111 NW 27TH AVENUE

MIAMI, FL 33142 US

Address: City-St-Zip: