

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 641671

FILED
May 01, 2009
Secretary of State

Entity Name: FERMAC FORK LIFT SERVICES, INC.

Current Principal Place of Business:

10212 NW 80 AVENUE
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

Current Mailing Address:

10212 NW 80 AVENUE
HIALEAH GARDENS, FL 33016

New Mailing Address:

FEI Number: 59-1946556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIGUEIREDO, MANUEL
18650 BOBOLINK
MIAMI LAKES, FL 33015 US

Name and Address of New Registered Agent:

FIGUEIREDO, MANUEL
18650 BOBOLINK DRIVE
MIAMI LAKES, FL 33015 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: MANUEL FIGUEIREDO

05/01/2009

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: PD () Delete
Name: FIGUERIREDO, MANUEL
Address: 18650 BOBOLINK
City-St-Zip: MIAMI LAKES, FL 33015

Title: ST () Delete
Name: FIGUEIREDO, MANUEL
Address: 18650 BOBOLINK
City-St-Zip: MIAMI LAKES, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FIGUERIREDO, MANUEL
Address: 18650 BOBOLINK DRIVE
City-St-Zip: MIAMI LAKES, FL 33015

Title: ST (X) Change () Addition
Name: FIGUEIREDO, MANUEL
Address: 18650 BOBOLINK DRIVE
City-St-Zip: MIAMI LAKES, FL 33015

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: MANUEL FIGUEIREDO

MR

05/01/2009

Electronic Signature of Signing Officer or Director

Date