

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J02835

FILED
Sep 22, 2009
Secretary of State**Entity Name:** BUMPER INDUSTRIES INC.**Current Principal Place of Business:**C/O ADAM BEHNEJAD
3026 N.W. 32ND. AVE., #2
MIAMI, FL 33142 US**New Principal Place of Business:**C/O ADAM BEHNEJAD
8113 N.W. 54 ST.
MIAMI, FL 33166 US**Current Mailing Address:**C/O ADAM BEHNEJAD
P.O. BOX 668318
MIAMI, FL 33166 US**New Mailing Address:****FEI Number:** 65-0017725 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BEHNEJAD, ADAM
8233 S.W. 78 ST.
MIAMI, FL 33143 US**Name and Address of New Registered Agent:**BEHNEJAD, ADAM
8113 N.W. 54 ST.
MIAMI, FL 33166 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: _____

Electronic Signature of Registered Agent

09/22/2009

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEHNEJAD, ADAM
Address: P.O. BOX 668318
City-St-Zip: MIAMI, FL 33166 US

Title: V () Delete
Name: BEHNEJAD, RAY
Address: P.O. BOX 668318
City-St-Zip: MIAMI, FL 33166 US

Title: S () Delete
Name: BEHNEJAD, RAY
Address: P.O. BOX 668318
City-St-Zip: MIAMI, FL 33166 US

Title: T () Delete
Name: BEHNEJAD, RAY
Address: P.O. BOX 668318
City-St-Zip: MIAMI, FL 33166

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

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: /ADAM BEHNEJAD/

Electronic Signature of Signing Officer or Director

P

09/22/2009

Date