

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J20784

FILED
Feb 25, 2008
Secretary of State

Entity Name: RICE PUMP AND MOTOR REPAIR, INC.

Current Principal Place of Business:

5740 POWER LINE RD
FT. LAUDERDALE, FL 33309 US

New Principal Place of Business:

5740 POWERLINE ROAD
FT. LAUDERDALE, FL 33309 US

Current Mailing Address:

5740 POWERLINE RD
FT. LAUDERDALE, FL 33309 US

New Mailing Address:

5740 POWERLINE ROAD
FT. LAUDERDALE, FL 33309 US

FEI Number: 59-2712791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHN T. MOUSTAKIS
67 S.W. 12TH WAY
BOCA RATON, FL 33486 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHN MOUSTAKIS,
Address: 67 S.W. 12TH WAY
City-St-Zip: BOCA RATON, FL 33309

Title: TREA () Delete
Name: D'ARCY, WILLIAM N
Address: 490 NW 42ND AVENUE
City-St-Zip: COCONUT CREEK, FL 33066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOHN T. MOUSTAKIS

P

02/25/2008

Electronic Signature of Signing Officer or Director

_____ Date