

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L78735

FILED
Mar 20, 2009
Secretary of State

Entity Name: SAMPLE AUTOCARE, INC.

Current Principal Place of Business:

301 E. SAMPLE ROAD
POMPANO BEACH, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

301 E. SAMPLE ROAD
POMPANO BEACH, FL 33064 US

New Mailing Address:

FEI Number: 65-0199232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIKUL, GREGORY D
301 E. SAMPLE ROAD
POMPANO BEACH, FL 33064 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: D () Delete
Name: PARENTE, MICHELE
Address: 506 NW 47 AVE
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: S () Delete
Name: PIKUL, GREGORY
Address: 2762 SW 15TH STREET
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: V () Delete
Name: ALVAREZ, ALFREDO
Address: 111 BRINY AVENUE #314
City-St-Zip: POMPANO BEACH, FL 33062

Title: T () Delete
Name: SALVATI, FERNANDO
Address: 1421 NE 41ST STREET
City-St-Zip: POMPANO BEACH, FL 33062

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: GREGORY PIKUL

S

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date