

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M01120

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: MESWAY TRUCK RENTAL, INC.

**Current Principal Place of Business:**

8609 SW 16 STREET  
DAVIE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

814 DES ORMEAUX  
QUEBEC J3G3A1  
BELOEIL, QC J3G3A1

**New Mailing Address:**

FEI Number: 65-0038795      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MAURICE, ROBERT  
1222 N.E.4 TH AVE.  
FORT LAUDERDALE, FL 33304      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: ST ( ) Delete  
Name: CHOQUETTE, JD  
Address: 191 ST LAURENT ST  
City-St-Zip: ST DAMASE PQ, CA

Title: PD ( ) Delete  
Name: MAURICE, ROBERT  
Address: 814 DESORMEAUX  
City-St-Zip: BELOEIL J3G 3A1 QC CANADA, QC

Title: D ( ) Delete  
Name: MAURICE, JOEL  
Address: 271 BERNARD  
City-St-Zip: CHATEAUGUAY PQ J6K 3Y6, CA

Title: D ( ) Delete  
Name: MAURICE, ANNIE  
Address: 846 BARTLETT STREET  
City-St-Zip: CASTLE ROCK, CO 80104 US

**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: ROBERT MAURICE

PD

04/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date