

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011026

FILED  
Apr 14, 2008  
Secretary of State

**Entity Name:** ENCHANTED DREAMZ CAR & BIKE CLUB INC.

**Current Principal Place of Business:**

4930 SW 141 AVE.  
MIAMI, FL 33175

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 832823  
MIAMI, FL 33283

**New Mailing Address:**

**FEI Number:** 59-3794770

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LABATOS, NIKOLAS  
4930 SW 141 AVE.  
MIAMI, FL 33175 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

**OFFICERS AND DIRECTORS:**

Title: CEO ( ) Delete  
Name: LABATOS, DIMITRIS  
Address: 4930 SW 141 AVE.  
City-St-Zip: MIAMI, FL 33175

Title: PD ( ) Delete  
Name: LOPEZ, ABDIEL  
Address: 6430 TAFT ST APT 207  
City-St-Zip: HOLLYWOOD, FL 33024

Title: VD ( ) Delete  
Name: LOPEZ, WILLIAM  
Address: 11051 SW 5TH ST  
City-St-Zip: MIAMI, FL 33174

Title: STD ( ) Delete  
Name: CABATOS, DIMITRIS  
Address: 4930 SW 141 AVE.  
City-St-Zip: MIAMI, FL 33175

Title: D ( ) Delete  
Name: LABATOS, NIKOLAS  
Address: 4930 SW 141 AVE.  
City-St-Zip: MIAMI, FL 33175

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: LABATOS, DIMITRIS  
Address: 4930 SW 141 AVE.  
City-St-Zip: MIAMI, FL 33175 US

Title: P (X) Change ( ) Addition  
Name: LOPEZ, WILLIAM  
Address: 11051SW 5 STREET  
City-St-Zip: MIAMI, FL 33174 US

Title: V (X) Change ( ) Addition  
Name: LOPEZ, JOSE  
Address: 1000 SW 104 CT APT#104  
City-St-Zip: MIAMI, FL 33174 US

Title: ST (X) Change ( ) Addition  
Name: LABATOS, DIMITRIS  
Address: 4930 SW 141 AVE.  
City-St-Zip: MIAMI, FL 33175

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIMITRIS LABATOS

CEO

04/14/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date