

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000027575

FILED  
Sep 11, 2006  
Secretary of State

Entity Name: MOTOPSYCHO INC.

## Current Principal Place of Business:

12901 W OKEECHOBEO RD  
#F11  
HIALEAH GARDENS, FL 33018

## Current Mailing Address:

12901 W OKEECHOBEO RD  
#F11  
HIALEAH GARDENS, FL 33018

FEI Number: 65-0993769

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAMARIO, CLAUDIO  
12901 W OKEECHOBEE RD #F11  
HIALEAH GARDENS, FL 33018 US

## New Principal Place of Business:

12901 W. OKEECHOBEE RD.  
#F11  
HIALEAH GARDENS, FL 33018

## New Mailing Address:

12901 W. OKEECHOBEE RD.  
#F11  
HIALEAH GARDENS, FL 33018

## Name and Address of New Registered Agent:

SEDENO, ALEX  
12901 W OKEECHOBEE RD .  
#F11  
HIALEAH GARDENS, FL 33018 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: ALEX SEDENO

09/11/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DAMARIO, CLAUDIO  
Address: 4110 W. 19TH AVE  
City-St-Zip: HIALEAH, FL 33012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SEDENO, ALEX  
Address: 12901 W. OKEECHOBEE RD. #F11  
City-St-Zip: HIALEAH GARDENS, FL 33018

I hereby certify that the information supplied with this filing does not qualify for the 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: ALEX SEDENO

P

09/11/2006

Electronic Signature of Signing Officer or Director

Date