


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2008 08:00 AM
Secretary of State

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| DOCUMENT # P00000035967 |  |
| 1. Entity Name ENGINE DISASSEMBLY SERVICES, INC. | |

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| Principal Place of Business 8356A N.W. SOUTH RIVER DRIVE MEDLEY FL 33166 | Mailing Address 8356A N.W. SOUTH RIVER DRIVE MEDLEY FL 33166 |
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| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | |
| State, Apt. #, etc. | | State, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

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| 1st MOORE | CR2E034 (10/07) |
| 4. FEI Number 65-0997892 | Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> |

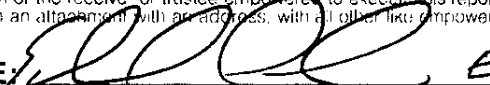
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| 6. Name and Address of Current Registered Agent ARIAS, EDUARDO 8356A N.W. SOUTH RIVER DRIVE MEDLEY FL 33166 | |
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| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | FL Zip Code |

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| 8. 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. I am familiar with, and accept the obligations of registered agent. | |
| SIGNATURE | DATE |

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| FILE NOW!!!-FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State | 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP ARIAS, EDUARDO 531 EAST 64 STREET HIALEAH FL 33013 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVT BETANCOURT, GEORGE L 9353 SW 155TH AVENUE MIAMI FL 33196 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVS BERGOUIGNAN, JOSE A JR 321 SW 104TH COURT SWEETWATER FL 33174 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | |
| SIGNATURE:  EDUARDO ARIAS | 2-1-08 (305) 888-4596 |