2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAR 30 AM 9:19

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DOCUMENT # P00000038782

1. Entity Name

RUES MOVING, CORP.

Principal Place of Business: ~~4000 SW 152 PLACE MIAMI FL 33185~~

Mailing Address: ~~4000 SW 152 PLACE MIAMI FL 33185~~

7774 SW 193rd ST miami Fla 33157

1st MOORE CR2E034 (10/04)

2. Principal Place of Business | 3. Mailing Address
Suite, Apt. #, etc. | Suite, Apt. #, etc.
City & State | City & State
Zip | Country | Zip | Country

4. FEI Number 65-1001236 — Applied For / Not Applicable

5. Certificate of Status Desired X — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOSE RUIZ, SANTIAGO
~~4000 SW 152 PLACE~~
~~MIAMI FL 33185~~

New address 7774 SW 193rd st miami-Fla 33157

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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 accep the obligations of registered agent.

SIGNATURE ______ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005, Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ — $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	RUIZ, SANTIAGO JOSE	
STREET ADDRESS	~~4000 SW 152 PLACE~~ 7774 SW 193rd ST	
CITY-ST-ZIP	~~MIAMI FL 33185~~ miami Fla 33157	
TITLE	SD	☐ Delete
NAME	RUIZ, ESPERANZA RITA	
STREET ADDRESS	~~4000 SW 152 PLACE~~ 7774 SW 193rd ST	
CITY-ST-ZIP	~~MIAMI FL 33185~~ miami Fla 33157	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
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TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informat 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 dire 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 changed, or on an attachment with an address, with all other like empowered.

Esperanza Ruiz (Secretary) 4/10/06