# **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

# FILED Mar 24, 2008 8:00 am Secretary of State

DOCOMENT	# 200000098138
A	



1. Entity Nam	Entity Name A T BUS AND TRUCK, INC.								03-24-2008 9	90044 0	09 ***158.	.75	
Principal Place of Business 9572 SYDNEY HAYES RD STE 102 ORLANDO, FL 32824			A 9	Mailing Address AT BUS & TRUCK 9572 SYDNEY HAYES RD STE 102 ORLANDO, FL 32824									
2. Principal Place of Business - No P.O. Box #			<b>3</b> .	3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.				03062008	Chg-P	CR2E	034 (12/06)		
City & State			,	City & State				4. FEI Numb		·	<b>⊢</b>	plied For of Applicable	
Zip		Country	-	Zip	Count	try		5. Certificate	of Status Desired	丞	\$8.75 Add		
	6. Name	and Address of Cu	ırrent Regis	tered Agent				7. Name and	Address of New F	tegistered	Agent	•	
GALDAMEZ, ROSA 9572 SYDNEY HAYES RD STE 102					•	Name FISA 1 - S Ab Ate 2  Street Address (P.O. Box Number is Not Acceptable)							
ORLANDO, FL 32824							72	SIDN	EYCHAY	es f		E#102	
						City O1	R Ia	rogo.		F	L   Zip Codi	824	
8. The above the obligat	ions of registe	submits this statement of agent	nent for the p	urpose of changing its	registere	ed office or	register	ed agent, or bo		~	familiar with,	and accept	
şt.	Signature, typed 8	orinted name of registere	d agent and title i	fapplicable. (NOTI	E: Registered	t Agent signatur	e required	when reinstating)		DATE			
FIL After M	E NOW!!! ay 1, 2008	FEE IS \$150.0 Fee will be \$	0 550.00	9. Election Campa Trust Fund Cont		cing		00 May Be ed to Fees				• ,	
10.	•	OFFICERS	AND DIREC	TORS	11.			ADDITIONS	CHANGES TO OFF	ICERS AN	D DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	Z, ELSA NEY HAYES RD , FL 32824	SUITE 102	☐ Delete							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Delete						-	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	-	-		———— Deists ——		l'					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	CITY-	ET ADDRESS ST-ZIP					☐ Change	Addition	
12. I hereby indicated	certify that the	information supplie or supplemental re	ed with this fi	ling does not qualify for	or the exe	emptions co ure shall ha	ontained ive the s	l in Chapter 11 same legal effe	9, Florida Statutes. I ct as if made under	further ce	ertify that the in am an officer	nformation or director	



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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**Document Number** 

P00000098138

**Business Entity Name** 

A T BUS AND TRUCK, INC.

**FEI Number** 

593680370

**FEI Number Status** 

Certificate of Status Desired No.

**Election Campaign Financing Trust Fund Contribution No** 

#### **Principal Place of Business**

Address

9572 SYDNEY HAYES RD

Suite, Apt. #, etc.

**STE 102** 

City, State

ORLANDO, FL

Zip Code & Country 32824

#### Mailing Address

**Address** 

9572 SYDNEY HAYES RD

Suite, Apt. #, etc.

**STE 102** 

City, State

ORLANDO, FL

Zip Code & Country 32824

### Name And Address of Registered Agent

Name (Last, First, Middle, Title) SABATER, ELSA

Address

9572 SIDNEY HAYES RD

Suite, Apt. #, etc.

**SUITE #102** 

City, State

ORLANDO, FL

Zip Code & Country

FL US

Registered Agent Signature

**ELSA SABATER**