2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000004008

Address:

City-St-Zip:

12221 W HILLSBOROUGH AVE

TAMPA, FL 33635

FILED Apr 30, 2008 Secretary of State

Entity Nam	ne: JALLO W	ASH & LUBE, INC.			
Current Principal Place of Business:			New Principal Place	of Business:	
12221 W H TAMPA, FL	ILLSBOROUG . 33635	H AVE			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX 309 TARPON SPRINGS, FL 34688				3087 ANDERSON SNOW ROAD SPRING HILL, FL 34609	
FEI Number:	59-3691719	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
JALLO, PAUL 12221 W HILLSBOROUGH AVE TAMPA, FL 33635 US				JALLO, PAUL 3087 ANDERSON SNOW ROAD SPRING HILL, FL 34609 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: PAUL JALLO				04/30/2008	
Electronic Signature of Registered Agent			nt	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () JALLO, PAUL 12221 W HILLS TAMPA, FL 336		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP () JALO, GEORGE 12221 W HILLS TAMPA, FL 336	BOROUGH AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DST () ASSIA. GUS	Delete	Title: Name:	() Change () Addition	

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

Address:

City-St-Zip:

SIGNATURE: PAUL JALLO P 04/30/2008