

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000044599

Entity Name: MOTO IMPORTS, INC.

FILED  
Feb 02, 2009  
Secretary of State

**Current Principal Place of Business:**

9279 STARPASS DRIVE  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

9279 STARPASS DRIVE  
JACKSONVILLE, FL 32256

**New Mailing Address:**

FEI Number: 59-3717749

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BRUWER, LEREE  
Address: 9279 STARPASS DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: BRUWER, LEREE MRS  
Address: 9279 STARPASS DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: DD ( ) Change (X) Addition  
Name: BRUWER, LOUIS H MR  
Address: 9279 STARPASS DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

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.

SIGNATURE: LEREE BRUWER

D

02/02/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date