

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000113048

Entity Name: FAMILY AUTOMOVE SERVICE, INC

FILED  
Jan 11, 2008  
Secretary of State

## Current Principal Place of Business:

2323 HIGHWAY 44 WEST  
INVERNESS, FL 34453

## New Principal Place of Business:

4775 S PLEASANT GROVE RD  
INVERNESS, FL 34452

## Current Mailing Address:

2323 HIGHWAY 44 WEST  
INVERNESS, FL 34453

## New Mailing Address:

4775 S PLEASANT GROVE RD  
INVERNESS, FL 34452

FEI Number: 80-0023905

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROZEK, MARK  
2323 HIGHWAY 44 WEST  
INVERNESS, FL 34453 US

## Name and Address of New Registered Agent:

ROZEK, MARK  
4775 S PLEASANT GROVE RD  
INVERNESS, FL 34452 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:

01/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: ROZEK, MARK  
Address: 2323 HIGHWAY 44 WEST  
City-St-Zip: INVERNESS, FL 34453

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: ROZEK, MARK  
Address: 4775 S PLEASANT GROVE RD  
City-St-Zip: INVERNESS, FL 34452

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: MARK ROZEK

PST

01/11/2008

Electronic Signature of Signing Officer or Director

Date