2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# P03000012604

Entity Name: AMERICAB, CO.

Current Principal Place of Business:

506 N ARCHER ST
TAMPA, FL 33609 US

New Principal Place of Business:

Current Mailing Address:

506 N ARCHER ST
TAMPA, FL 33609

New Mailing Address:

FEI Number: 43-1995012 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TADESSE, THOMAS
506 N ARCHER ST
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

TADESSE, THOMAS
2492 BROWNWOOD DR
MULBERRY, FL 33860 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: THOMAS TADESSE 02/19/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ARAYA, MESFIN MR
Address: 506 N ARCHER ST
City-St-Zip: TAMPA, FL 33609 US

Title: VP ( ) Delete
Name: ENGEDA, TADESSE MR
Address: 506 N. ARCHER
City-St-Zip: TAMPA, FL 33609 US

Title: S ( ) Delete
Name: THOMAS, TADESSE MR
Address: 506 N ARCHER ST
City-St-Zip: TAMPA, FL 33609 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ARAYA, MESFIN MR
Address: 4403 AKITA DR
City-St-Zip: TAMPA, FL 33624 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: THOMAS, TADESSE MR
Address: 2492 BROWNWOOD DR
City-St-Zip: MULBERRY, FL 33860 US

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: THOMAS TADESSE S 02/19/2009
Electronic Signature of Signing Officer or Director Date