

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000023824

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: PREMIUM MOBILE LUBE INC.

## Current Principal Place of Business:

5851 HOLMBERG RD #1715  
PARKLAND, FL 33067

## New Principal Place of Business:

5851 HOLMBERG RD # 2116  
PARKLAND, FL 33067

## Current Mailing Address:

5851 HOLMBERG RD #1715  
PARKLAND, FL 33067

## New Mailing Address:

5851 HOLMBERG RD # 2116  
PARKLAND, FL 33067

FEI Number: 54-2098449

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MACINTER CORPORATION  
5440 NORTH STATE RD 7 STE 218  
FT LAUDERDALE, FL 33319 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: DP ( ) Delete  
Name: MURILLO, JOSE  
Address: 5851 HOLMBERG RD #1715  
City-St-Zip: PARKLAND, FL 33067

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: MURILLO, JOSE  
Address: 5851 HOLMBERG RD #2116  
City-St-Zip: PARKLAND, FL 33067

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSE H. MURILLO

MR.

04/19/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date