

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000151543

Entity Name: E.LORENZO TRUCKING INC.

FILED
Mar 07, 2009
Secretary of State

Current Principal Place of Business:

6190 NW 186TH ST. APT. #6
MIAMI, FL 33015

New Principal Place of Business:

6691 COW PEN RD APT A205
MIAMI LAKES, FL 33014

Current Mailing Address:

6190 NW 186TH ST. APT. #6
MIAMI, FL 33015

New Mailing Address:

6691 COW PEN RD APT A205
MIAMI LAKES, FL 33014

FEI Number: 77-0617064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LORENZO, ELEONEL
4328 SW SANTA BARBARA PL.
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

LORENZO, ELEONEL
6691 COW PEN RD APT A205
MIAMI LAKES, FL 33014 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: ELEONEL LORENZO

03/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LORENZO, ELEONEL
Address: 4328 SW SANTA BARBARA PL.
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LORENZO, ELEONEL
Address: 6691 COW PEN RD APT A205
City-St-Zip: MIAMI LAKES, FL 33014

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: ELIONEL LORENZO

P

03/07/2009

Electronic Signature of Signing Officer or Director

Date